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MATERNAL-CHILD HEALTH/FAMILY PLANNING SURVEY  
PANAMA 1984

ENGLISH LANGUAGE REPORT  
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# Maternal-Child Health/Family Planning Survey

Panama 1984

## Table of Contents

	Page
Contributors to Survey	1
Summary and Conclusions	2
I. Introduction	7
II. Survey Methodology	9
III. Data Quality Comparisons	10
IV. General Demographic Factors	12
V. Planning Status and Current Pregnancy Intentions	15
VI. Knowledge of Contraceptive Methods	16
VII. Current Use of Contraception	18
VIII. Sterilization and the Demand for Sterilization	21
IX. Source of Contraception	27
X. Reasons for Nonuse of Contraception and Desire to Use in the Future	29
XI. Characteristics of Women In Need of Family Planning Services	32
XII. History of Spontaneous and Induced Abortion	33
XIII. Use of Maternal-Child Health Services	35
XIV. Immunization Levels	41
XV. Health Region Data	42
References	46
Tables	



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## SUMMARY AND CONCLUSIONS

The 1984 Panama Maternal-Child/Family Planning Survey (PMCHFP) was a nationally representative probability sample which consisted of interviews of women 15-49 years of age living in households included in the sample frame. This report focuses on the fertility, contraceptive use and maternal-child health (MCH) services used by these women. In addition, data from the 1976 World Fertility Survey (WFS) in Panama and the 1979 Panama Contraceptive Prevalence Survey (CPS) are used to identify changes that have occurred relative to these topics in Panama during the past decade.

### Fertility and Breastfeeding

Between 1976 and 1979 the total fertility rate (TFR) in Panama declined from 4.6 to 3.9. However, over the most recent 5 years there has been little change in overall fertility in Panama (TFR = 3.7 in 1984). The most noticeable change in fertility has been the decline in the urban-rural differential, but in 1984 the rural rate was still over one child higher than the urban.

Breastfeeding trends have changed in Panama during the past decade. Using the 1979 CPS data, Monteith et al (1981) found that the duration of breastfeeding had declined between 1976 and 1979 in rural areas, with the urban duration unchanged. Findings from the 1984 PMCHFP survey suggest that the trend in breast-feeding has reversed. Both the urban and rural areas have higher average durations of breast-feeding in 1984 than in 1979. Also, the urban-rural differential persisted in 1984, as the duration of breast-feeding was 5 months longer, on average, in rural than urban areas (13 vs 8 months, respectively).

### Contraceptive Use

Contraceptive use, like fertility, has been fairly stable in Panama during the past 5 years. This lack of change follows a rapid gain in use from 1976 to 1979 (53 to 63 percent, respectively). While overall contraceptive use has been constant from 1979 to 1984 there has been an important method change. Female sterilization has increased in prevalence while the use of orals has declined. In 1984, over one-third of all currently married women 15-44 years of age were sterilized. This pattern of increased use in female sterilization and decline in the use of orals has been found in other countries in recent studies: Puerto Rico (1978 to 1982), United States (1976 to 1982), and Costa Rica (1976 to 1981) (London et al., 1985).

Contraceptive use was higher in urban than rural areas of Panama (65 vs 54 percent). The association between use and other socio-demographic characteristics was similar to that found in other Latin American countries (London et al., 1985). Contraceptive use increases with age, reaching over 70 percent by age 35+. At ages less than 25, orals is the most prevalent method used, while female sterilization is the most prevalent at ages 25+. These findings suggest that when women reach or exceed their desired family size they use female sterilization rather than temporary methods to prevent having more children. The findings further show that at young ages (less than 25 years) and low parity most women are not using contraception. Therefore, adequate spacing of pregnancies and limiting the number of pregnancies a woman has is a problem in Panama. This point is further underscored by the fact that 17 percent of last pregnancies were unplanned.

Contraceptive use is also positively associated with education. Female sterilization is the primary method used by all education groups; however, the use of female sterilization decreases as education level increases. Interestingly, the less educated, compared to the more educated, are less likely to use contraception and are less likely to know about female sterilization but are more likely to use female sterilization.

The use of female sterilization has increased rapidly in Panama during the past decade. In 1976, 21 percent of ever-married women were sterilized, this increased to 33 percent in 1984. Also, the demand for sterilization, among the non-sterilized, is very high in Panama. Over three-fourths of the women not currently sterilized stated that they wanted to have the operation either presently or after they reach their desired family size. The primary constraint to having the operation, presently, was related to institutional barriers with the women either being considered too young or having too few children. Analysis of the 1976 Panama WFS data suggested that sterilization averted approximately one birth per woman (Westoff et al., 1979). Since the use of sterilization has increased in Panama during the past decade it is likely more than one birth per woman is now being averted. Finally, less than 3 percent of the women who were sterilized stated that they regretted having had the operation.

#### Women In Need

Overall, approximately 13 percent of all women were found to be at risk of an unplanned pregnancy or "in need" of family planning services. In absolute numbers, 61,428 women were in need of family planning services in Panama in 1984. The level of need had not changed between 1979 and 1984. In general, the survey data suggest the family planning program in Panama should continue

to be oriented toward young (less than age 30), married, non-working women who live in rural areas and have less than secondary education. This general conclusion is similar to that reached by Monteith et al. (1981) in their analysis of the 1979 Panama CPS data.

#### Use of MCH Services

Findings from the 1984 PMCHFP survey show very high use of MCH services in Panama. Nearly 90 percent of the women used prenatal care during their last pregnancy, over 80 percent had a postpartum checkup and over 90 percent took their last live birth in for at least one well-baby checkup. Use of MCH services was higher in urban than rural Panama, but use was very high in both areas. Over three-fourths of the women used all 3 MCH services and only 3 percent used no services. The percent who used all three MCH services was higher in urban than rural areas, and the percent increased with education. Women who used all three MCH services were, also, more likely to currently use contraception than women who used no MCH services.

Nearly 90 percent of last births were delivered in a hospital or health care center, with urban births in health facilities almost universal (98 percent vs 81 percent in rural areas). Only 6 percent of the women used a midwife for their last delivery. The use of a midwife was greater in rural areas (11 percent) and for women with less than primary complete education (18 percent). Of all last deliveries occurring in a hospital, 16 percent were Cesarean. Women of higher socioeconomic status and those delivering in urban areas were more likely to have a Cesarean delivery than lower socioeconomic status women.

### Primary Immunization Levels

Findings from the survey indicate high levels of completed primary immunization among children less than 5 years of age. Nearly two-thirds of the children less than 5 had completed immunization for polio, DPT, and measles. Immunization levels were similar in the urban and rural areas. Also, almost all children who had received a completed series of primary immunization (i.e., polio, DPT, and measles) were vaccinated by age 2, with the percentage leveling off thereafter. This pattern is similar to that found in the 1979 Panama CPS (Huezo et al., 1982) and in Guatemala in 1983 (Monteith et al., 1985).

### Indians

Indians represent less than 10 percent of the total population of Panama, yet they appear to be a population with definite family planning needs. The indigenous areas were included in the 1984 survey for the first time. Only 28 percent of Indians are currently using contraception compared to 61 percent of non-Indians. The most prevalent method used by Indians is female sterilization, similar to that of non-Indians. Indians are over twice as likely to be in need of family planning services as non-Indians (29 vs 12 percent, respectively). Further, over one-third of rural Indians are in need of family planning services compared to 16 percent of non-Indians.

### Health Regions

As expected from the previous results, those health regions with large Indian populations and rural areas have very different MCH/family planning service profiles relative to other health regions. These rural/Indian health regions tend to have very high fertility (TFR = 6+), very low contraceptive use (less than 50 percent), high need for family planning services (20-30 percent in

need), moderate use of MCH services, and moderate levels of completed child immunization. In contrast, the more urban, non-Indian health regions have low fertility (TFR = 3), high contraceptive use (60+ percent), low need for family planning services (10 percent), high use of MCH services and high child immunization levels. From these results, three health regions can be identified as very high priority areas for MCH/family planning support (Bocas del Toro, Darien and San Blas). Other health regions with high need for MCH/family planning services support include: Cocle, Colon, Chiriqui, and Veraguas (each with high fertility and low-moderate use of MCH and family planning services).

## I. INTRODUCTION

The 1984 Maternal-Child Health/Family Planning Survey (PMCHFPS) had three general objectives. First, the 1984 survey is a follow-up to the 1979 Contraceptive Prevalence Survey (CPS) in Panama. Therefore, estimates of fertility, the prevalence of contraceptive use, the primary source of services used and other demographic factors can be compared over time. Second, the sample size for the 1984 survey was enlarged over that used in 1979 so basic demographic and family planning estimates could be made for most of the 12 health regions in Panama. In addition, the sample design in the 1976 World Fertility Survey (WFS) and the 1979 CPS excluded two health regions--Darien and San Blas; therefore, the 1984 PMCHFPS was the first survey to include the total population of Panama. Third, females 15-24 years of age were asked more detailed questions concerning their sexual experience and general knowledge concerning reproductive events than in the previous surveys.

From these general objectives specific demographic and reproductive health indicators can be estimated:

1. Fertility levels at the national and most health region levels
2. Levels of knowledge and current use of contraceptives can be determined for a variety of social and demographic background factors. Also, the methods used and the source where current users obtained contraception is available.
3. Women not currently using contraception are asked reasons for not using. From these responses, estimates can be made of the percentage of women who are in need of family planning services (i.e., women at risk of an unplanned pregnancy).
4. The proportion and characteristics of women who do not want any more children and who would consider surgical contraception as a permanent method of limiting fertility can be determined.
5. The proportion of women with a history of spontaneous and/or induced abortion, including the percentage who needed medical care or hospitalization or both following the abortion, can be determined.
6. The use of maternal-child health services and immunization levels for children less than 5 years of age at time of interview can be examined.

The initial plans for the survey were proposed in November 1982 by the Ministry of Health with technical assistance from the Division of Reproductive Health of the Centers for Disease Control (CDC). However, the decision to enlarge the sample size so health region estimates could be possible was not made until



February 1984. Fieldwork began in July 1984 and continued until April 1985. Numerous administrative delays led to the fieldwork taking 5 months longer than originally planned. CDC consultants assisted in the training of interviewers and team supervisors. After completion of the fieldwork, coding, keypunching and initial range and logic edits were conducted in Panama. The final clean tape was completed in December 1985. Analysis and report writing took place both at CDC and in Panama. In March 1986, the results were disseminated in Panama by the Ministry of Health. The survey was supported by the U.S. Agency for International Development (USAID).

## II. SURVEY METHODOLOGY

### Sampling Design

The 1984 survey was a multi-stage area probability survey. All women 15-49 years of age in each selected household were eligible to be interviewed. Because estimates were desired at the Health Region level, several health regions had to be oversampled; therefore, the overall sample design was not self-weighting. Rates, proportions and means from the survey data were based on weighting factors designed to adjust for the unequal selection probabilities. More detailed information on the sampling design is included in the Spanish language report.

As shown in Table 2-1, 70 percent of the 11,756 households contained or may have contained, at least one woman age 15-49. The individual completion rate was 91 percent, with the rate slightly higher in the rural than urban area (94 vs 88 percent). The individual refusal rates were within the expected range of 1 to 3 percent. A total of 8,240 women 15-49 years of age had completed interviews.

Table 2-2 shows the household and individual interview status for each health region. The percentage of households which contained or may have contained, at least one woman age 15-49 was 70 percent. This rate was lowest in the most urban regions (Colon, 60 percent; Panama Oeste, 65 percent; and Panama Metro, 65 percent), due primarily to the combined effect of refusals and the eligible respondent not at home after several visits. The individual completion rate in Panama Metro (85 percent) was the lowest, again due mainly to a high refusal rate (4 percent). Table 2-3 shows the individual completion rates by age of the eligible respondent. As in other surveys, the youngest age group (15-19) had the lowest completion rate and the highest refusal rate.

### III. DATA QUALITY COMPARISONS

In this section, age and marital status data will be compared in two ways. First, age and marital status data from the household and respondent questionnaires from the 1984 PMCHFPS can be compared. And, second, age and marital status data from the 1984 PMCHFPS can be compared to two external sources--the 1980 Census in Panama and the 1979 Contraceptive Prevalence Survey in Panama.

#### Age

Table 3-1 shows that age reported in the respondent and household questionnaires is quite similar. In over 90 percent of the household and respondent questionnaires, age is the same, and over 95 percent of the time the ages are in the same 5-year age groups.

Table 3-2 compares the age distributions of women 15-44 in Panama across three data sets: the 1984 PMCHFPS, the 1980 census, and the 1979 CPS. The percentage of women 15-19 reported in the 1984 survey is lower in both urban and rural areas, compared to the 1980 and 1979 data. This is not totally unexpected since the 15-19 year olds had the lowest interview completion rate of any age group in the 1984 PMCHFPS (Table 2-3).

### Marital Status

Table 3-3 compares the percent ever-married by age group for the household and the respondent questionnaires. The percentage ever-married is slightly higher for the completed respondent questionnaires. The results in Table 3-4 show the typical survey pattern in Latin America where some women who are self-identified as in consensual union or separated/divorced in the respondent questionnaire are identified as single in the household questionnaire. This is not unexpected since the household information was obtained from any knowledgeable household member, but not necessarily the respondent.

When the percent ever married, by age, in the 1984 PMCHFPS is compared to similar categories from the 1980 Census, expected differences are found (Table 3-5). The survey has a higher percent ever married for each age group and residence location compared with the census. Table 3-6 documents this reporting difference by showing the census (and the survey household questionnaire) with a higher percent single than the survey's respondent questionnaire.

Florez and Goldman (1980) found a similar pattern of differences in their analysis of nuptiality data from the 1976 Colombia National Fertility Survey. They concluded, "An informant other than the eligible woman herself may have

been more apt to misreport the woman's marital status, particularly if the woman was not currently in a legal union." In Panama, information on both the 1980 Census and the household questionnaire could be obtained from a "proxy" informant, thus, leading to this type of discrepancy.

In summary, there are no major anomalies found in the 1984 PMCHFPS data on age and marital status. The only problem with the age data results from the lower completion rate for women age 15-19 (relative to the older women). As in other surveys, the teenage group is a mobile group and more difficult to find at home. The marital status data appears to be accurately reported in the respondent questionnaire.

#### IV. GENERAL DEMOGRAPHIC FACTORS

In this chapter, fertility and breast-feeding data from the 1984 PMCHFPS are presented. These estimates are compared, where appropriate, with values from the 1976 WFS, the 1979 CPS, and the 1980 Census in Panama.

##### Fertility

The results in Table 4-1 suggest that since the 1976 survey fertility has declined in Panama; however, over the past 5 years the decline has been very slight. The early decline then recent plateau in fertility, has occurred in both the urban and rural areas. This can be seen by comparing the completed fertility (i.e., mean number of children ever born to women 40-44) in the two residential areas for 1976, 1979 and 1984. The urban-rural difference declined from 2.6 to 1.6 children on average from 1976 to 1979, but in 1984 the difference was 1.2; so little change occurred from 1979 to 1984.

Period fertility rates can also be estimated from the 1984 survey data and compared to results from the 1979 CPS (Table 4-2). However, two caveats must be mentioned. First, because interviewing extended from July 1984 to April 1985, the fertility rates were estimated for the 12-month interval immediately prior to each date of interview; thus, the point estimates of fertility actually refer to a "synthetic" 12 month period rather than a single point in time. Second, for those tables comparing the rates in 1984 and 1979, all interviews in the Darien and San Blas health regions were excluded. As previously mentioned, these health regions were not included in the survey design for either the 1979 CPS or the 1976 WFS.

Standard fertility rates were calculated: general fertility rate (GFR), total fertility rate (TFR), and crude birth rate (CBR). The CBR was derived by applying the age-sex distribution data in 1984 projected from the 1980 Census to the 1984 survey results. Fertility estimates indicate the TFR in Panama declined slightly from 3.9 in 1979 to 3.7 in 1984 (Table 4-2). By residence, these results show the urban rate increased (2.7 to 3.2), while the rural rate declined by 0.9 child (5.2 to 4.3). Table 4-2 further shows that when all women in Panama are included, the TFR in 1984 is 4.0.

Two points can be made concerning fertility in Panama. First, fertility has declined only slightly from 1979 to 1984. Taking into account survey sampling error, even the decline in the rural area is not statistically significant. This suggests that the fertility decline in Panama from 1976 (TFR = 4.6) to 1979 (TFR = 3.9) has not continued in the past 5 years, (1984 TFR = 3.7). Second, the urban-rural fertility differential has diminished, but the rural rate is still over one child higher than the urban.

### Breast-feeding

Breast-feeding is an important determinant of fertility since its duration directly affects the length of the postpartum anovulatory period. Overall, 94 percent of the women who reported a live birth within 24 months of the date of interview said they breast-fed that child (Table 4-3). Over 90 percent of women in both urban and rural areas breast-fed their last child. In fact, there was little variation in the prevalence of breast-feeding across a variety of social factors (education, work status, ethnicity, and residence); all categories were at or above 90 percent.

While the prevalence of breast-feeding is quite high in Panama, the duration varied substantially across the sociodemographic factors analyzed (Table 4-4). Overall, women breast-fed for 11 months on average with the duration higher in the rural than urban areas (13 vs 8 months). The mean duration of breast-feeding is negatively associated with education, which is similar to patterns found elsewhere in Latin America (Anderson, et al., 1983). Also, women who work (especially those who work outside the home) have shorter durations of breast-feeding than women who do not work. Finally, Indians have a much longer mean duration of breast-feeding than non-Indians (18 vs 10 months) as was also documented in Guatemala (Monteith et al., 1985).

A slight increase in the mean duration of breastfeeding occurred between 1979 and 1984 (Table 4-5). This minor increase occurred in both the urban and rural areas of Panama. Reporting on the 1979 Panama CPS, Monteith et al. (1981) found that from 1976 to 1979 the duration of breastfeeding had declined in the rural areas, and remained unchanged in the urban areas. Results from the 1984 PMCHFP suggest this downward trend has been reversed.

## V. PLANNING STATUS OF LAST PREGNANCY AND CURRENT PREGNANCY INTENTION

All ever-pregnant women were asked two questions about the planning status of their last pregnancy: "Was the last pregnancy desired?" If not, "Did you want no more children, or did you want some, but later?" On the basis of these questions, each woman's last pregnancy was classified as either "planned," "mistimed," "unwanted", or "unknown". Planned pregnancies were defined as those that were desired; mistimed pregnancies were classified as those that were desired, but at some time in the future; and the unwanted pregnancies were those not desired, even at a future time. Using this scheme, the mistimed and unwanted pregnancies can be combined as an estimate of unplanned pregnancies.

Table 5-1 shows that 9 percent of the last pregnancies were unwanted and 17 percent were unplanned. The percent unwanted is similar in the urban and rural areas (9 percent, respectively). Unwantedness increases with age and parity. Over one-fifth of the women with 6+ births had not wanted their last pregnancy. In general, unwantedness is negatively associated with socio-economic status, as measured by education and work status.

The percentage of pregnancies that were unwanted increased slightly from 1979 to 1984, though not significantly (Table 5-2). A slight increase occurred in almost every category of the socio-demographic variables analyzed, but none of the increases were statistically significant.

Current pregnancy intention by selected characteristics of the respondent is shown in Table 5-3. In Panama, 9 percent of currently married women are pregnant, 13 percent desire to get pregnant and 74 percent are not pregnant

and do not desire a pregnancy. The results in Table 5-3 also show that the desire to become pregnant has a strong negative association with parity, but a very weak negative association with age, two variables that are highly correlated. In general, after two births, women in Panama do not appear to be eager to get pregnant. There is little difference in desire for pregnancy by work status.

## VI. KNOWLEDGE OF CONTRACEPTIVE METHODS

All of the respondents were asked, "Have you ever heard of (Method X)?" for each contraceptive method available in Panama. We analyze their responses for the individual methods used in Panama in this chapter.

Table 6-1 shows wide variation in the knowledge of individual methods. For currently married women, orals and female sterilization are the most widely known (over 90 percent) while the least likely known methods (less than 50 percent) are the least effective--rhythm, withdrawal, diaphragm and Billings. The IUD, injection and condoms are also well known (over 80 percent) while about 70 percent knew of foam or male sterilization.

For all methods, knowledge was greater in the urban than rural areas. In the urban area over 90 percent of the women knew of orals, female sterilization, injection, IUD or condom, while in the rural area only orals were known by more than 90 percent of the women.

Knowledge of individual methods is lower for women not currently married compared to those currently married (Table 6-1). However, over three-fourths of the women not currently married report that they know the most effective



methods (orals, female sterilization, injection, condom, and IUD). As seen for the currently married women, the women not currently married who lived in urban areas had greater knowledge of each method than those women living in rural areas.

Currently married women less than 25 years of age have less knowledge of most contraceptive methods than older women (Table 6-2). This is especially true of women age 15-19; for each method the percent with knowledge is 10 to 20 points lower than the percent for older women. The currently married women 20-24 years of age are only slightly less knowledgeable of the highly effective methods (orals, female sterilization, IUD, condom, or injection) than the older women.

Table 6-3 shows that knowledge of individual contraceptive methods is positively associated with education. Over 90 percent of currently married women with university level education have knowledge of every method, except the less effective--diaphragm, withdrawal, and Billings. In contrast, no method is known by at least 90 percent of women with less than primary complete education, and only orals and female sterilization are known by 90 percent or more of women with primary complete education.

As may be expected, women who are current users of contraception are more knowledgeable of the methods available in Panama than nonusers (Table 6-4). In urban areas the user/nonuser difference in knowledge is minimal, especially for the most effective methods (ie., orals, female sterilization, injection, IUD and condom). In the rural areas, current users are much more likely than nonusers to have knowledge of the individual methods.

## VIII. CURRENT USE OF CONTRACEPTION

This chapter focuses on current contraceptive use among currently married women age 15-44. A number of social and demographic factors which are associated with use are discussed: residence, age, education, ethnicity, and work status. Trend comparisons in contraceptive use from 1976 to 1984 can be made by excluding from the 1984 tabulations the Darien and San Blas health regions and the 15-19 year-old age group which was not interviewed in 1976. However, most of this chapter reports on the contraceptive behavior of all married women throughout Panama in 1984. A separate report will deal with contraceptive use among unmarried women and premarital sexual experience of women 15-24 years of age.

The results in Table 7-1 show that for currently married women 20-44 years of age, contraceptive use increased by over six points from 1976 to 1979, but from 1979 to 1984 there was no change in the level of use. These trends show use in urban areas increasing from 1976 to 1979 but declining during the past 5 years. In contrast, use in the rural areas, which went up sharply from 1976 to 1979, increased only slightly from 1979 to 1984. The most important change from 1979 to 1984 was in terms of method-mix. Table 7-2 shows that contraceptive sterilization and the IUD increased in use, in both urban and rural areas, while the use of orals declined. Contraceptive sterilization (female sterilization) has increased dramatically in Panama during the past decade, such that in 1984 over one-third of all currently married women 15-44 years of age were sterilized. This pattern of increased use of sterilization and decline in the use of orals has been found in other countries in recent years: Puerto Rico (1978 to 1982), United States (1976 to 1982), and Costa Rica (1976 to 1981) (London et al., 1985).

The remainder of this chapter covers current contraceptive use for all currently married women 15-44 years of age in Panama. In total, 59 percent of currently married women 15-44 were currently using contraception (Table 7-3). Over one-third of these women were using contraceptive female sterilization, with orals the second most prevalent method and the IUD third. Total use in the urban areas was 11 percentage points higher than in rural Panama (65 vs 54 percent); but the method mix in the two residential areas was similar (i.e., female sterilization most prevalent, followed by orals and the IUD). The use of any other method was of little importance in either area. This urban-rural difference in overall contraceptive use held when a variety of social and demographic factors were controlled (Table 7-4). For each age, education, and work status category, and regardless of the number of living children, contraceptive use was higher in urban than rural areas.

Non-Indians were much more likely to use contraception than Indians (61 vs 28 percent) (Table 7-5). For each ethnic group, female sterilization was the most prevalent method used, although the ethnic group differences were substantial (35 vs 11 percent). The use of other methods varied for the ethnic groups. Other than sterilization, non-Indians were more likely to use orals or the IUD, while Indians were equally likely to use rhythm or orals.

Contraceptive use increases with age, generally, reaching over 70 percent at age 35+ (Table 7-6). In the two youngest age groups (15-19 and 20-24) orals are the most prevalent method used, followed by the IUD. For the older age groups (i.e., age 25+) female sterilization is the most prevalent method used. For the two oldest age groups (35-39 and 40-44), over 80 percent of the current users of contraception are using female sterilization. This shows that as women complete their desired family size they use sterilization rather

than a temporary method, to prevent having more children. This point is further indicated by the dramatic increase in the use of female sterilization after women have their second child (Table 7-7). The use of female sterilization increases over 6-fold between women having one and women having two living children. After having three children, over one-half of the currently married women in Panama have had a sterilization.

We used two indicators of social status (education and woman's work status) to assess the relationship between contraceptive use and socio-economic status. Use of contraception is positively associated with education, a trend also found in 1979 (Table 7-8). The importance of the various methods changes across the education groups. First, female sterilization is the most prevalent method used by all of the education groups, but the prevalence and consequently the proportion of users who use female sterilization decreases as education increases. However, at any given age, less educated women tend to be of higher parity. In Chapter 6, we found a strong positive association between knowledge of female sterilization and education. Thus, less educated women, compared to the more educated, are less likely to use contraception and are less likely to know about female sterilization but are more likely to use female sterilization. The less educated do not appear to delay or space their childbearing (i.e., they marry at younger ages and have shorter time in school), as the higher educated do, so the less educated may reach their desired family size at an earlier age and seek sterilization as the means to limit their childbearing. Second, the use of the IUD is positively associated with education. Third, the use of orals increases in prevalence through the secondary complete level of education, then declines. The positive association between contraceptive use and education holds, in general, across a variety of social and demographic factors (Table 7-9).

Work status is also associated with contraceptive use (Table 7-10). Women who work outside the home were more likely to use contraception than women who did not work or those working at home (65 percent compared to 57 and 59 percent). However, the method distribution for each work status category was similar (i.e., female sterilization most prevalent, followed by orals and the IUD). In each of the work status categories over 30 percent of the women were sterilized.

Finally, the data in Table 7-11 compares the 1984 PMCHFPS results with recent survey results from other countries in Central America and the Caribbean. Puerto Rico, Costa Rica, and Panama have the highest prevalence in the region. In Puerto Rico, Panama, the Dominican Republic, El Salvador and Guatemala, the most prevalent method used is sterilization (over 99 percent of the contraceptive sterilizations are to females in each country with the exception of Puerto Rico where it is 96 percent). In the other countries in the region (Costa Rica, Mexico, and Honduras) orals are the most prevalent method used, followed closely by sterilization.

#### VIII. STERILIZATION AND THE DEMAND FOR STERILIZATION

As discussed in Chapter 7, female sterilization is the most prevalent contraceptive method currently used in Panama. In this chapter we focus, in detail, on the characteristics of women with female sterilizations, the timing of sterilization relative to the reproductive cycle, interest in and information concerning sterilization among women who want to limit their families, reasons for lack of interest among uninterested women, and reasons for failure to follow through among interested and informed women.

### Characteristics of Sterilized Women

In Table 8-1, several social and demographic covariates are related to the use of sterilization for ever-married women 15-44 years of age. One-third of the ever-married women age 15-44 in Panama reported sterilization as their method of contraception. Age, duration since first marriage, and number of children ever born were positively associated with the use of sterilization. Education is negatively associated with sterilization, but even at the highest education levels, over one-fourth of the women are sterilized. There is little difference in the prevalence of sterilization by residence, although urban women have a slightly higher rate. Also, women who work are slightly more likely to use sterilization than women who do not work. Finally, non-Indians are much more likely to use sterilization than Indians.

### Timing of Sterilization

This section examines the timing during the reproductive cycle when sterilization occurred for the 1,838 ever-married women who reported being sterilized. The timing of sterilization has obvious relevance to fertility and population growth in Panama.

Table 8-2 shows that 38 percent of the operations occurred from 1981-1985 and 70 percent took place since 1976. Only 22 percent of the operations took place 10-15 years prior to the date of interview. Thus, the length of time that women in Panama have used sterilization is fairly short, over 90 percent in the past 15 years.

The most popular ages for sterilization are between 25-34 years, accounting for over two-thirds of all operations. In total, nearly 85 percent of the

operations occurred before age 35. Similarly, for marriage duration, 64 per- cent of the operations occurred between durations 5-14 years, and over 80 per- cent in less than 15 years since date of first marriage.

Sterilized women are distributed across a wide range of parities, but 82 per- cent took place at parity 3 or greater. Most women have had their operation at para 3 (28 percent). Over 45 percent of the sterilizations occurred postpartum, and 73 percent took place in the first year after the last birth. The remainder extend over a long range, with 13 percent after 5 years.

The timing of sterilization in the reproductive cycle in Panama appears to have changed little between 1976 and 1984. In 1976 and in 1984, the most popular times are, ages 25-34 and at marriage durations of 5-14 years. Parity has considerable variation and nearly three-fourths occur within 1 year following the last birth (see Westoff et al., 1979, for results from the 1976 WFS).

#### Births Averted

Table 8-3 compares the fertility of women sterilized to those nonsterilized by age, years since first marriage and length of exposure to the risk of child- bearing. The exposure category is determined differently for sterilized women (i.e., length of exposure equals the duration of marriage at time of the opera- tion) and nonsterilized women (i.e., length of exposure for women who want no more children equals the duration of marriage at time of interview). The results in Table 8-3 show that differences in fertility (i.e., number of children ever born) are greatest at early ages and short durations. However, at the older ages and longer durations there is little difference in fertility,

which suggests sterilization has had little effect on averting births in Panama. This conclusion can be clarified, somewhat by examining the "exposure" time data. When years at risk of childbearing are equated, the sterilized women have higher fertility than the non-sterilized (reaching over one child on average by 20+ years of exposure). This suggests sterilized women in Panama are self-selected for their high fertility. An actual estimate of the number of births averted in 1984 is not included in this report but will be the subject of a separate analysis. However, we can note that Westoff et al. (1979) found using the 1976 WFS data, that by 30 years of marriage 1.14 births were averted by sterilization. This estimate is based on the proportions sterilized by marriage duration. Since the proportion sterilized increased at all marriage durations between 1976 and 1984, we can continue to assume that in 1984, by 30 years of marriage, sterilization averted somewhat greater than one birth per woman.

#### Satisfaction With Decision

All women who had a tubal sterilization were asked two questions concerning their satisfaction with having had the operation: "Are you now satisfied with your decision to have the operation?" and "Would you like to have an operation to be able to have children again?" Table 8-4 shows over 80 percent of the women stated that they were "definitely" satisfied with having had the operation. This high percentage held for both urban and rural residence and for all of the education categories. Only 3 percent of the women said they were definitely not satisfied with having had a tubal sterilization. There was no difference in residence but the percent dissatisfied increased slightly with education. When sterilized women were asked a hypothetical question, would they be interested in sterilization reversal if such as operation were



available, 12 percent of the women stated that they would like to have an operation so they could have more children (Table 8-5). The percent interested in reversal was slightly greater in rural than urban areas, and the less educated were more likely than the higher educated to desire reversal.

#### Demand for Sterilization

All fecund women who did not want any more children were asked whether they were interested in having a sterilization. As shown in Table 8-6, over three-fourths of the women said they were interested in sterilization, with the percentage similar in the urban and rural areas (77 and 74 percent, respectively). Women aged 20-34 years were most likely to be interested in sterilization, with the oldest women (40-44 years) least likely. Women with middle levels of education (primary complete to secondary complete), two to five living children, and women not working were most likely to be interested in sterilization.

Of women who did not want any more children and were interested in sterilization, over three-fourths (76 percent) had knowledge of the availability of services or information concerning these services (Table 8-7). There was no difference in knowledge by residence, work status or current contraceptive use status (all were at or above 75 percent). Knowledge increased, generally, with age, education, and number of living children.

Nearly one-half of the women who knew where to obtain sterilization information and/or services cited the Ministry of Health as their source (Table 8-8). Another 12 percent named Social Security hospitals and 14 percent cited the Ministry of Health and Social Security integrated hospitals.

All of the women who said that they did not want any more children, had interest in having the operation, and knowledge concerning sterilization services, were asked why they had not been sterilized (Table 8-9). Over one-fourth of these women stated they had been refused surgery by a physician because they were too young. Further analysis showed over 90 percent of these women were less than 30 years of age and 84 percent had three or fewer living children.

An additional 14.0 percent gave economics as their reason and 11 percent said they presently were "setting it up." Thirteen percent stated they were currently pregnant/postpartum, which suggests the interviewer did not probe for an adequate response to this question or they are planning a sterilization after their current pregnancy. Less than 5 percent gave a response such as, "fears operation" or "husband against."

Finally, all women who currently wanted more children were asked about their interest in having the operation after they had all the children they wanted (Table 8-10). Overall, as with the women who did not want more children, over three-fourths were interested in having the operation. However, interest in the urban area (86 percent) was much higher than the rural (68 percent).

Results from this chapter suggest that the demand for sterilization has been and continues to be very high in Panama. Further, this demand is widespread across all residence and socioeconomic segments of the population. The primary reasons for not having the operation are institutional barriers (physician refusal and cost). If these institutional barriers are reduced, it is likely the use of sterilization would increase.

## IX. SOURCE OF CONTRACEPTION

This chapter discusses sources of contraception and the time to reach those sources. Source of contraception was asked separately for users of tubal sterilization (women with hysterectomies were not asked their source) and for users of other methods of contraception (including vasectomies).

Nearly 70 percent of the tubal sterilizations were performed in Ministry of Health locations (41 percent in Integrated Hospitals and 24 percent in the Santo Tomas Hospital in Panama City) (Table 9-1A). Other important sources for the tubals were Social Security Hospitals (17 percent) and private hospitals (11 percent). The Ministry of Health was the primary provider in both urban and rural areas. The other sources varied by residence. In urban areas the Social Security hospitals were second in importance (23 percent) followed by private hospitals (11 percent), while in the rural areas the Social Security and private hospitals were almost equal in importance (9 and 11 percent, respectively).

For all methods, other than tubal sterilizations, the Ministry of Health was the primary provider of contraceptives (34 percent) followed by the private pharmacy (29 percent) and social security (12 percent) (Table 9-1B). There were urban/rural differences. In the urban areas, the private pharmacy (35 percent) was the primary source, followed by the Ministry of Health (26 percent). In the rural areas, the Ministry of Health was primary (45 percent) followed by the private pharmacy (22 percent).

Table 9-2 shows the association between source and education. For tubal ligations, the use of Ministry of Health services is negatively associated with education. For the university educated, the private hospital is the primary source (38 percent) followed by social security (25 percent). For the less educated (less than secondary education) nearly two-thirds of the women received their tubals in Ministry of Health facilities (i.e., Integrated Hospital and Santo Tomas Hospital). A similar pattern is found for the sources used for methods other than tubal sterilization (Table 9-2). For the higher educated users, private sources are primary (i.e, private pharmacy or private doctor/hospital), while for the less educated, the Ministry of Health is the primary provider.

Table 9-3 examines the source of contraception for three methods (i.e., orals, IUD, and condom). The private pharmacy (43 percent) is the primary source for orals, followed by the Ministry of Health and Social Security. The primary source for the IUD is the Ministry of Health (58 percent) followed by Social Security (19 percent) and private doctor/hospital. Over one-half of the condoms are provided by private pharmacies.

There have been important changes in the sources for contraceptives between 1979 and 1984 (Table 9-4). For orals, the private pharmacy has become the primary source, replacing the Ministry of Health. For the IUD, the Ministry of Health has remained the primary provider but the secondary provider changed. In 1984, Social Security replaced the private doctor as the main secondary source. For the condom, the private pharmacy remained the primary source but it declined in importance from 65 percent to 54 percent. The increase in services occurred about equally in the Ministry of Health and Social Security.

The time required to reach a source of contraception for women currently using was less for users living in urban areas than for rural residents (Table 9-5). Table 9-6 shows the average time-to-source of contraception was 20 minutes for urban current users and 34 minutes for rural users. The same urban-rural differential held for nonusers who know of a source of contraception. The average time-to-source was 23 minutes for urban non-users and 35 minutes for rural nonusers.

Data on time-to-source can be compared for 1984 and 1979 (see Monteith et al., 1981, for 1979 data). Between 1979 and 1984 there was little change in the average time-to-source for urban residents (approximately 20 minutes in each for both current users and nonusers). However, an important decline in average time-to-source has occurred in the rural area. In 1979 the average time-to-source for rural current users was 46 minutes, in 1984 the average declined to 34 minutes. It is interesting that this sharp reduction in time-to-source (an indicator of greater availability/accessibility) did not lead to a pronounced increase in use of contraception in the rural area (Table 7-2). The percentage of currently married women currently using contraception only increased from 55 to 57 percent from 1979 to 1984.

#### X. REASONS FOR NONUSE OF CONTRACEPTION AND DESIRE TO USE IN THE FUTURE

In this survey, nonusers of contraception were asked, in an open-ended question, the reasons why they were not currently using contraception. This chapter covers the reasons given by the respondents and the relationship between the characteristics of nonusers and the desire to use contraception. For women who want to use a method, the preferred method and source are discussed.

Table 10-1 shows that of the married women not currently using contraception, 67 percent were not using for reasons related to pregnancy, subfecundity, or infrequent sexual relations. Thus, in general, 33 percent of nonusers could be considered candidates for adopting contraception at the time of the survey. There was little difference in the reasons for nonuse between urban and rural residents.

The major reasons for nonuse, unrelated to pregnancy, were "fear of side effects" (11 percent) and "does not like/want" (5 percent). Potentially, education programs concerning the use of various contraceptive methods could have an impact on reducing the importance of these factors. Again, there was little difference between the urban and rural distributions.

Table 10-2 shows reasons for nonuse by education. There is a slight increase in pregnancy related reasons as education level increases. However, even for the least educated (less than primary complete), over 60 percent give reasons related to pregnancy. In general, for all education levels "fear of side effects" and "does not like/want" are the primary, non-pregnancy related reasons for nonuse. As previously mentioned, an education program could have an impact on these issues. Table 10-3 shows data for reasons for nonuse by work status (another socioeconomic indicator). The results are similar to those for education.

Table 10-4 shows that the proportion of fecund nonusers who want to use a method was 30 percent. Rural nonusers were slightly more interested in use than urban nonusers (34 vs 23 percent, respectively). Desire to use was negatively associated with education, and women working outside their home

were less likely to desire to use than other women. Desire to use had a positive association with parity and, in general, younger women were more likely to desire to use than older women. The right-hand panel of Table 10-4 shows that nearly 80 percent of the nonusers who desire to use a method have knowledge of a source of contraceptives.

Table 10-5 shows the method of choice and the source mentioned by nonusers desiring to use a method. The most frequently desired methods were orals (34 percent), sterilization (15 percent), IUD (14 percent) and injectables (12 percent). The distribution of methods of choice were similar for urban and rural women. About 20 percent of the nonusers gave "Don't know" as their method of choice, with the percentage being higher in rural (24 percent) than urban (12 percent) areas. Over 70 percent gave the Ministry of Health as their potential source, while 11 percent indicated social security and 15 percent private sources.

Table 10-6 shows the method of choice and source by education. At all education levels nearly one-third of the women would use orals. The other important methods of choice include sterilization, IUD, and injectables.

There is some variation by education in the level of choice of these three methods, but the differences are not substantial. The primary potential source for those with less than secondary education is the Ministry of Health (over three-fourths). For the more highly educated, the Ministry of Health (over 50 percent), social security (20 percent), and private care (23 percent) are the important potential sources reported.

## XI. CHARACTERISTICS OF WOMEN IN NEED OF FAMILY PLANNING SERVICES

Using the survey data, certain segments of the population can be identified as having greater need of family planning services than others. A woman was characterized as "in need of services" (or "at risk of unplanned pregnancy") if she was not currently pregnant, stated that she did not currently desire to become pregnant, and she either (1) was using an ineffective method (douche or herbs), or (2) was not using any method for reasons not related to pregnancy, subfecundity, or sexual inactivity. Thus, the women defined here as "in need of services" are noncontracepting, fecund, sexually active women (regardless of marital status), who were not currently pregnant and did not desire to become pregnant at the time of the interview.

The overall percentage in need in 1984 (Table 11-1) is similar to that reported in 1979 (13 and 12 percent, respectively) (for the 1979 data see Monteith et al, 1981). In absolute numbers, an estimated 61,400 women were in need of family planning services in Panama in 1984. The percentage in need varies across the social and demographic characteristics included in Table 11-1. The percentage in need is twice as high in rural than urban areas (17 vs 9 percent) and women age 20-34 are more likely to be in need than the youngest (15-19) or the oldest women (age 35+). In need is negatively associated with education; over one-fifth of those with less than primary complete education are in need of family planning services compared with 10 percent of women with a university education. Nearly one-quarter of the less educated are in need of services in the rural area. Nearly 30 percent of the Indians are in need, compared to 12 percent of non-Indians. And, over one-third of the Indians living in the rural areas are in need of family planning services. Women not working are slightly more likely to be in need



than working women, especially in the rural area. In the urban area, women working at home are the least likely to be in need. The general patterns of need across this variety of characteristics is similar to that found in 1979 (Monteith et al, 1981).

The percentages in Table 11-1 indicate the segments of the population in which the relative need for family planning services is greatest. In order to derive program goals, the women defined as being in need, i.e., the numerators in Table 11-1, have been categorized as a percent distribution for each socioeconomic variable (Table 11-2). From Table 11-2, 64 percent of women in need live in rural areas. Fifty percent of the women in need are between ages 20-29, nearly 85 percent are currently married, over 80 percent have less than secondary complete education, nearly 80 are not working, and nearly 50 percent have three or more living children. Although a significant proportion of Indian women are in need (Table 11-1), only 13 percent of all women in need are Indians.

To summarize this chapter, the survey data indicate that the family planning program in Panama should emphasize services oriented toward young (20-29), married, nonworking women who live in rural areas and have less than a secondary education.

## XII. HISTORY OF SPONTANEOUS AND INDUCED ABORTIONS

All respondents were asked whether they had ever had an abortion, either spontaneous or induced. If they had, they were then asked how many they had undergone, and whether their last or only abortion was spontaneous or induced.

As shown in Table 12-1, 13 percent of women reported that they had had at least one spontaneous or induced abortion. The percentage reporting an abortion was positively associated with age and negatively associated with education. Ever married women were much more likely to report having had an abortion than never married women. Women who worked outside their home were more likely to have had an abortion relative to either women who work at home or those not working. There was little urban/rural difference in the percentage reporting having had an abortion across any of the characteristics analyzed.

Of the women reporting a history of abortion, 6 percent said their last abortion was induced (Table 12-2). The reporting of induced abortion was slightly higher in urban than rural areas, and among those with university education relative to other levels of education. Results in Table 12-3 show one-fourth of women with a history of abortion reported having had more than one abortion.

All women with a history of abortion were asked if they had any complications following their most recent abortion that required medical attention (Table 12-4). Over 80 percent had received medical treatment, with the percentage reaching 90 percent in the urban area. The percentage receiving medical treatment is positively associated with education, reaching over 98 percent for those with university education. Of those who received medical treatment, nearly 80 percent were hospitalized. The Ministry of Health was the primary source of care in both the urban (54 percent) and rural (70 percent) areas (Table 12-5). The Social Security (22 percent) and private (14 percent) hospitals were also important sources of care in urban areas.

### XIII. USE OF MATERNAL AND CHILD-HEALTH SERVICES, AND THE PREVALENCE OF

#### DIARRHEA AND ITS TREATMENT

This chapter covers use of maternal and child health (MCH) services, including prenatal, post-partum, and well-baby care. Factors influencing the use of these services are examined as well as the source of these services with respect to various socioeconomic factors. In addition, location and type of last delivery (Cesarean or vaginal) is examined. The use of MCH services is also assessed in terms of its association with family planning. Finally, the prevalence of diarrhea 1 week prior to interview among children less than 5 years of age and the treatment they received is examined.

#### Prenatal Care

Married women age 15-44 who had at least one live birth within 5 years of the date of interview were asked if they had a prenatal examination during their most recent pregnancy. Nearly 90 percent of the women responded that they had received an examination (Table 13-1). The percentage receiving a prenatal exam was higher in the urban (95 percent) than rural (85 percent) areas. In urban areas the primary source of care was the Ministry of Health, but over one-quarter of the women went to a private hospital or clinic and 18 percent used Social Security services. In the rural area, over 70 percent of the women used one of the Ministry of Health facilities.

Receiving a prenatal examination was positively associated with education (Table 13-2). Only 72 percent of the women with less than primary complete education received prenatal care compared to over 90 percent for those women with secondary or higher education. The source of care also varied with education. The Ministry of Health provided over 70 percent of the services

for the less educated, while the more educated were most likely to use private hospitals or clinics.

As shown in Table 13-3, nearly 80 percent of the women received their first prenatal checkup during the first 3 months of pregnancy. This percentage was higher for urban women than for rural women (83 vs 75 percent, respectively). The percentage receiving care in the first trimester was positively associated with education. The number of visits for prenatal care also varied by residence and education. Nearly one-third of the urban women made eight or more visits compared to one-fourth for the rural. Also, over one-half of the university educated had 8 or more visits compared to one-fifth for the less educated. Women receiving prenatal care at private hospitals or clinics were more likely to obtain their first prenatal visit early than women receiving care at Government facilities (Table 13-4).

The relationship between the use of MCH services and whether the respondent received a tetanus injection during her last pregnancy is examined in Table 13-5. Fifty-eight percent of the women received tetanus injections, with the percentage in the rural area slightly higher than the urban. However, those women in the rural area who received all three MCH services were much more likely to have received a tetanus injection than the similar group of women in the urban area. A negative association was found between receiving a tetanus injection and education. This may reflect a lack of attention to this preventive health care component in these groups, but the more likely explanation is that these women had received a tetanus injection prior to the last pregnancy. Since a tetanus booster provides adequate immunity for 10 years, some clinicians, especially in the private sector, may decide not to re-immunize these women.

### Place and Type of Last Live Birth

Table 13-6 shows the place of last live birth for women who had a live birth within 5 years of interview. Over 88 percent of the women reported that their last child was delivered in a hospital or health care center. The percentage in the urban areas (98 percent) was much higher than in the rural areas (81 percent). Eleven percent of the deliveries in the rural areas were done by midwives, compared to 1 percent in the urban area. Type of delivery was associated with education (Table 13-7). The less educated women were more likely to rely on home deliveries than the higher educated. Over 97 percent of the deliveries for women with secondary education or above were in hospitals or health care centers. In contrast, 18 percent of deliveries to women with less than primary complete education were by midwives. Women whose last delivery was in a hospital were asked if their most recent birth was a vaginal or a Cesarean delivery (Table 13-8). Of all last deliveries occurring in a hospital, 16 percent were Cesarean. The percentage of deliveries that were Cesarean was slightly higher in urban than rural areas, was positively associated with education (reaching 30 percent for the university level), and was high for low parity (1-3 births) women.

Table 13-9 shows the percentage of women who reported a problem during their last pregnancy. The most noticeable problems reported were swollen feet (64 percent) and high blood pressure/severe headaches (51 percent). There was no urban/rural difference. About one-fifth of those women who had a problem were hospitalized.

### Post-Partum Care

Over 80 percent of women who had at least one live birth in the last 5 years reported receiving a postpartum checkup following their last delivery (Table 13-10). As with prenatal care, the percentage receiving postpartum care was higher in urban than rural areas and had a strong positive association with education. Only 63 percent of those with less than a primary complete education received postpartum care compared to over 90 percent for those with secondary complete or higher education. The bottom panel of Table 13-10 shows that 94 percent of the women received their postpartum checkup less than 2 months after delivery. This very high percentage did not vary substantially by residence or education.

### Well-Baby Care

Women with at least one live birth within 5 years of interview were asked if they had taken their last liveborn child for a well-baby checkup (Table 13-11). Ninety-four percent of infants received well-baby care. Use of well-baby care was higher in urban (97 percent) than rural (92 percent) areas. Also, the percentage receiving well-baby care was positively associated with education, but 83 percent of the least educated took their infants in for well-baby checkups.

The Ministry of Health was the primary source for well-baby care both in urban and rural areas. In urban areas and for those with higher education, the private hospital/clinic was also an important source of care.

The bottom panel of Table 13-11 shows that 85 percent of the children received their infant care at less than 1 month of age, and 97 had received the care by

the time they were 2 months old. Only the least educated (less than primary complete) were likely to delay taking their infants in for care, 7 percent received their care at age 2 months or older.

#### Utilization of All Three Services

This section analyzes the combined use of all three maternal-child health services--prenatal, postpartum, and well-baby care (Tables 13-12 through 13-14). Over three-fourths of the women who had at least one live birth within 5 years of interview said that they had used all three services (Table 13-12). Only 3 percent had used no services. The percentage receiving all three services was much higher in the urban than rural areas (84 vs 70 percent, respectively). Five percent of the women in the rural area received no services. The percentage receiving all three services was positively associated with education. Fifty-four percent of women with less than primary complete education received all three services compared to nearly 90 percent for women with secondary complete or higher education. Eleven percent of women with less than primary complete education received no services.

Results in Tables 13-13 and 13-14 examine the association between current contraceptive use and the use of MCH services. In Table 13-13, current users of contraception are more likely to have used all three MCH services (86 percent) than those women not currently using contraception (64 percent). Also, 6 percent of those women not currently using contraception used no MCH service. Table 13-14 shows that the use of any MCH service was highly related to current use, 62 percent of those women who used all three MCH services are currently using contraception compared to only 13 percent for women using none of the MCH services. The urban/rural differential in use persisted across the

MCH categories. That is, for every comparison concerning the MCH services, the percentage currently using contraception is higher in urban areas than rural areas. Specifically, for women who used all three MCH services, 69 percent of the women in the urban area were currently using contraception compared to 55 percent of the women in the rural area.

#### Prevalence of Diarrhea and Its Treatment

In this survey, all children less than 5 years of age living in the respondent's households were identified. Questions regarding whether each child had had diarrhea during the week prior to interview were asked. If a child had had diarrhea, the respondent was asked what treatment the child received for that episode of diarrhea. Diarrhea was defined only if the respondent asked. The World Health Organization definition was used: three loose or watery stools for each of 2 consecutive days.

Table 13-15 shows that 10 percent of children less than 5 years of age were reported to have had diarrhea during the week prior to interview. Rural children were more likely to have had diarrhea than urban children and children less than 2 years of age were more likely to have had diarrhea than older children. There was a minor association between the prevalence of diarrhea and various socioeconomic indicators. Children living in houses where the source of drinking water was a river or stream, or with no electricity, or whose sanitary services were either a common latrine or none, were more likely to have had diarrhea than children living in better conditions.



About half of those children who had diarrhea were treated with medicine (Table 13-16), but only 5 percent received oral rehydration therapy or intravenous treatment. The likelihood of being treated did not vary significantly by residence.

#### XIV. IMMUNIZATION LEVELS

In the survey, we also evaluated the immunization coverage of children less than 5 years of age. Questions were asked as to the number of doses of vaccine received against poliomyelitis, diphtheria-tetanus-pertussis (DPT), and measles for each child. In addition, it was asked whether vaccinated children had a vaccination certificate.

The World Health Organization (WHO) recommends that primary immunizations should be completed before the first year of age. The number of doses considered primary immunization recommended by WHO and adopted by the Panama Ministry of Health are: three doses each of Polio and DPT vaccines and one dose of measles vaccine. A second dose of measles vaccine administered after 15 months of age is necessary to provide adequate protection if the first dose was given before the first year of age.

Table 14-1 shows the levels of reported protection are similar for polio and DPT. That is, 65 percent have completed immunization and less than 10 percent have had no polio or DPT vaccinations. However, one-fifth of the children have had no measles vaccination. Table 14-2 shows the level of completed immunization in Panama for each disease: polio, DPT, and measles. For all three diseases (both in urban and rural areas) approximately two-thirds of the

children have received complete immunization. The level of completed immunizations reported in 1984 are higher than the corresponding levels in 1979 (polio = 55 percent; DPT = 53 percent; measles = 58 percent).

Table 14-3 shows that for age 1 over 70 percent of the children have received complete vaccinations. The major increase in immunization is from less than 1 year to 1 year of age. Although some increase is seen after age 1, the percentage with completed vaccination levels off. Table 14-4 expands on the results in Table 14-3 by including residence information. For all three diseases a similar pattern follows. First, the level of completed immunization increases dramatically from less than age 1 to age 1, then increases slightly from age 1 to ages 2-4. This pattern holds in both urban and rural areas. Second, the level of completed immunization is higher in the urban areas compared to the rural at each age.

#### XV. HEALTH REGION DATA

This chapter focuses on the fertility and family planning data for the 12 health regions in Panama. Table 15-1 shows general demographic conditions in each region. The health regions can be divided into three groups based on the characteristics in Table 15-1.

Group 1--Health regions that have high Indian populations that are mostly rural and have a high percentage of women with less than primary education (i.e., Bocas del Toro, Darien, and San Blas).

Group 2--Health regions that are 50 percent or more rural, have low percent Indian population, and have a moderately high percentage with less than secondary education (i.e., Cocle, Colon Chiriqui, Herrera, Los Santos, Panama Oeste, Panama Este, and Veraguas).

Group 3--Health regions that are majority urban with very few Indians and a generally high level of education (i.e., Panama Metropolitan).

The rest of this chapter will focus on the fertility and general family planning differences among the health regions by Group. Table 15-2 shows the mean number of children ever born for ever-married women by age in each region. At age 40-44 (near completed fertility), the mean number of children ever born is over 7 for Group 1, ranges from 4.4 to 6.4 for Group 2, and is 4.2 for Group 3. Table 15-3 shows a similar pattern of differences when the fertility rates are compared.

Fertility in Group 1 is extremely high, TFR 6.0+. Group 2 has a good deal of variation, from TFR of 5.7 to the lowest TFR (2.9 in Los Santos) of any health region. Group 3 has a TFR of 3.2.

Over 90 percent of the women breast-fed their last live birth in every health region, except Los Santos (Table 15-4). While the prevalence of breast-feeding was similar in most health regions, the duration of breastfeeding varied substantially. Group 1 had the longest duration, 14 months or longer. The duration of breast-feeding ranged between 9 months and 1 year in Groups 2 and 3. Los Santos had the shortest duration, less than 5 months.

Table 15-5 shows the level of current contraceptive use for each health region. Contraceptive use in Group 1 is very low (50 percent or less, with only 20 percent using in San Blas). Group 2 has much variation, from low use (47 percent in Cocle and Veraguas) to over 70 percent use (Los Santos and Panama Este). Contraceptive use in Group 3 (Panama Metro) is 64 percent. In each health region female sterilization was the most prevalent method, reaching over 40 percent in three regions (Los Santos, Panama Este, and Herrera). Orals were the second most common method used in each health region, followed by the IUD.

Results in Table 15-6 examine the reasons for not currently using contraceptives by health region. In each region, between one-half to three-fourths of noncontraceptors gave pregnancy related reasons for non-use. Interestingly, the four regions with the lowest TFRs (Los Santos, Panama Metro, Herrera, and Panama Oeste) have over 10 percent desiring pregnancy (Los Santos has 21 percent). The most common reasons, other than pregnancy related, include "fear of side effects" and "does not like/want." These are reasons which could be overcome with a strong educational program. All of the Group 1 and most of the Group 3 health regions would benefit greatly from this type of program.

The percent of women in need of family planning services by health region is shown in Table 15-7. Between 20 and 30 percent of women in Group 1 are in need of services. The need for family planning services is also great (between 15 and 19 percent) in four Group 2 health regions (Veraguas, Colon, Cocle, and Chiriqui). In the other health regions, need is approximately 10 percent or less.

The use of MCH services is generally high in all 12 health regions (Table 15-8). The percentage using all three MCH services is lower in Group 1 (59 to 66 percent) than in Group 2 (65 to 83 percent) or Group 3 (86 percent). Similarly, the percentage of children less than 5 years of age with completed immunization is low in Group 1 (50-58 percent for polio and DPT and 59 to 65 percent for measles) and very high in Groups 2 and 3 (polio and DPT=60 to 74 percent and measles 60 to 75 percent) (Table 15-9).

## REFERENCES

- Anderson John E., Walter Rodrigues, and Antonio Marcio Tavares Thome. 1983.  
Analysis of Breast-feeding in Northeastern Brazil: Methodological and  
Policy Considerations. Studies in Family Planning, Vol. 14, No.  
8-9:210-218.
- Florez C.E. and Noreen Goldman. 1980. An Analysis of Nuptiality Data in the  
Colombia National Fertility Survey. WFS Scientific Reports, No. 11.
- Huezo Carlos M., Richard S. Monteith, Humberto Naar, and Leo Morris. 1982.  
Use of Maternal and Child Health Services and Immunization Coverage in  
Panama. PAHO Bulletin, Vol. 16, No. 4: 329-340.
- London K.A., J. Cushing, S. O. Rutstein, J. Cleland, J. E. Anderson,  
L. Morris, and S. H. Moore. 1985. Fertility and Family Planning  
Surveys: An Update. Population Reports, Series M, No. 8.
- Monteith Richard S., John E. Anderson, Felix Mascarin, and Leo Morris. 1981.  
Contraceptive Use and Fertility in the Republic of Panama. Studies in  
Family Planning, Vol. 12, No. 10: 331-340.
- Monteith Richard S., John E. Anderson, M. A. Pineda, R. Santiso, and Mark W.  
Oberle. 1985. Contraceptive Use and Fertility in Guatemala. Studies in  
Family Planning, Vol. 16, No. 5: 279-288.
- Westoff Charles F., James McCarthy, Noreen Goldman, and Felix Mascarin. 1979.  
Illustrative Analysis: Contraceptive Sterilization and Births Averted in  
Panama. WFS Scientific Reports, No. 4.

TABLE 2-1

Interview Status by Residence (Percent Distribution)  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Household Selection</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
Household Completed	69.6	67.8	71.2
No Eligible Respondent	17.8	15.9	19.4
Vacant Household	1.4	1.1	1.7
Total Refusal	1.7	2.8	0.7
Resident Not Home	6.6	9.0	4.5
Other	2.9	4.4	2.5
Total	100.0	100.0	100.0
Number of Households	(11,756)	(5,332)	(6,424)

<u>Individual Selection</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
Completed Interview	91.3	88.2	94.0
Eligible Respondent Not Home	5.2	7.4	3.4
Eligible Respondent Refused	2.2	3.2	1.4
Other	1.3	1.2	1.2
Total	100.0	100.0	100.0
Number of Possible Respondents	(9,025)	(4,155)	(4,870)

NOTE: In this and subsequent tables, subtotals may not add to totals due to rounding.

TABLE 2-2

Interview Status by Health Region (Percent Distribution)  
1984 Panama Maternal-Child Health/Family Planning Survey

Household Selection	Health Region												
	Total	Bocas del Toro	Cocle	Colon	Chiriqui	Darien	Herrera	Los Santos	Panama Oeste	Panama Metro	Panama Este	Veraguas	San Blas
Household Completed	69.6	88.4	75.5	60.4	71.2	92.4	68.7	65.3	65.3	65.6	70.9	66.9	86.8
No Eligible Respondent	17.8	5.6	15.2	27.6	18.4	6.3	26.1	28.6	13.6	14.8	15.8	25.4	5.7
Vacant Household	1.4	0.0	1.5	1.3	1.9	0.0	0.3	2.1	4.6	0.6	2.0	1.5	0.0
Total Refusal	1.7	0.4	0.5	2.8	0.5	0.0	0.7	1.1	0.8	4.0	0.8	0.7	1.9
Resident Not Home	6.6	2.5	5.5	4.4	5.8	0.8	2.4	2.0	11.8	10.8	7.6	4.1	1.9
Other	2.9	3.1	1.8	3.5	2.2	0.5	1.8	0.9	3.9	4.2	2.9	1.4	3.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of Possible Respondents	(11,756)	(674)	(871)	(950)	(1,776)	(366)	(693)	(700)	(1,091)	(2,961)	(354)	(1,108)	(212)

Individual Selection	Health Region												
	Total	Bocas del Toro	Cocle	Colon	Chiriqui	Darien	Herrera	Los Santos	Panama Oeste	Panama Metro	Panama Este	Veraguas	San Blas
Completed Interview	91.3	95.2	94.9	92.3	92.9	96.5	96.6	95.8	88.0	84.9	91.4	94.4	96.9
Eligible Respondent Not Home	5.2	2.4	3.0	3.5	3.8	2.1	1.2	2.2	9.7	9.4	5.7	2.6	1.0
Eligible Respondent Refused	2.2	1.6	1.1	2.6	1.8	0.6	0.2	1.5	1.6	4.3	1.4	1.6	1.0
Other	1.3	0.8	1.0	1.6	1.5	0.8	2.0	0.5	0.7	1.4	1.5	1.4	1.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of Possible Respondents	(9,025)	(630)	(709)	(626)	(1,352)	(339)	(494)	(455)	(822)	(2,331)	(279)	(793)	(195)



TABLE 2-3

Respondent Interview Status by Age (Percent Distribution)  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Individual Selection</u>	<u>Total</u>	<u>Age of Respondent*</u>						
		<u>15-19</u>	<u>20-24</u>	<u>25-29</u>	<u>30-34</u>	<u>35-39</u>	<u>40-44</u>	<u>45-49</u>
Completed Interview	91.3	88.5	92.1	94.4	93.1	93.5	91.0	93.7
Eligible Respondent Not Home	5.2	6.8	4.6	3.3	4.1	4.1	5.2	3.0
Eligible Respondent Refused	2.2	3.3	1.9	1.6	1.6	1.5	2.4	1.7
Other	1.3	1.4	1.4	0.7	1.2	0.8	1.4	1.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of Possible Respondents	(9,025)	(1,862)	(1,742)	(1,494)	(1,200)	(1,065)	(892)	(697)

\*Excludes 73 cases with exact age unknown.

TABLE 3-1

Percent Age Reported in Respondent Questionnaire Differs from Age  
Reported in Household Questionnaire by Age from Respondent Questionnaire  
1984 Panama Maternal-Child Health/Family Planning Survey

Difference* In Years	Total	Age from Respondent Questionnaire						
		15-19	20-24	25-29	30-34	35-39	40-44	45-49
-3 or more	0.8	0.3	0.2	0.6	0.7	1.6	1.1	2.0
-2	0.5	0.1	0.2	0.8	0.6	0.7	0.5	1.1
-1	2.3	1.6	1.6	2.2	3.2	3.4	3.0	1.7
0	93.5	95.6	94.7	93.9	92.5	89.9	93.1	92.5
1	2.2	1.8	1.9	2.1	2.0	3.6	1.8	2.1
2	0.2	0.2	0.3	0.3	0.1	0.3	0.1	0.5
3 or more	0.5	0.4	1.1	0.1	0.9	0.5	0.4	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Difference  
In 5-Year  
Age Groups

-3 or more	0.1	0.1	0.0	0.0	0.2	0.4	0.4	0.0
-2	0.2	0.0	0.0	0.1	0.3	0.3	0.2	0.5
-1	0.9	0.0	0.6	1.2	0.6	1.7	1.1	2.1
0	98.0	99.2	98.2	98.4	97.6	96.8	97.4	97.4
1	0.6	0.4	0.9	0.3	1.2	0.5	0.9	0.0
2	0.1	0.0	0.2	0.0	0.1	0.3	0.0	0.0
3 or more	0.1	0.3	0.1	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

\*Difference = Age recorded in Household Questionnaire - Age recorded in  
Respondent Questionnaire

Percent Distribution, 5 Year Age Groups, Women Age 15-44  
by Residence, Several Data Sources

[illegible]

TABLE 3-3

Percentage of Women Ever-Married, by Age Groups According  
to Household Questionnaire and Respondent Questionnaire  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Age</u>	<u>Household Questionnaire</u>	<u>Respondent Questionnaire</u>
15-19	25.5	24.0
20-24	66.8	69.6
25-29	85.9	90.6
30-34	91.5	96.4
35-39	92.4	96.6
40-44	93.6	98.0
45-49	92.8	97.6
Total	72.9	75.8

TABLE 3-4

Percentage Distribution of Respondents According to Reported Marital  
Status in Respondent and Household Questionnaire  
1984 Panama Maternal-Child Health/Family Planning Survey

Household Questionnaire	Respondent Questionnaire				
	Married	Consensual Union	Separated/ Divorced	Widowed	Single
Married	98.8	2.1	2.5	1.4	0.5
Consensual Union	0.9	86.7	3.7	0.0	1.2
Separated/Divorced	0.1	0.4	80.7	0.0	0.4
Widowed	0.0	0.1	1.2	97.2	0.1
Single	0.2	10.6	11.7	1.4	97.6
Don't Know	0.0	0.1	0.2	0.0	0.2
Total	100.0	100.0	100.0	100.0	100.0

TABLE 3-5

Percentage of Women Ever-Married, by Age Group  
Respondent Questionnaire Compared to 1980 Census

<u>Age</u>	1984 PMCHFPS			1980 Census		
	<u>Total</u>	<u>Urban</u>	<u>Rural</u>	<u>Total</u>	<u>Urban</u>	<u>Rural</u>
15-19	24.0	17.1	32.8	20.4	12.4	30.7
20-24	69.6	60.9	80.0	60.5	51.3	73.8
25-29	90.6	88.1	93.3	82.1	76.6	89.7
30-34	96.4	95.1	97.9	89.1	85.6	93.8
35-39	96.6	95.8	97.4	91.8	89.4	94.4
40-44	98.0	98.1	97.9	91.9	89.4	94.9
45-49	97.6	96.5	98.5	92.6	89.3	96.4

TABLE 3-6

Percent Distribution of Women Age 15-49 by Marital Status  
 1984 Panama Maternal-Child Health/Family Planning Survey  
 Compared to 1980 Census

<u>Marital Status</u>	1984 PMCHFPS		1980 <u>Census</u>
	<u>Respondent Questionnaire</u>	<u>Household Questionnaire</u>	
Married	67.8	66.0	57.4
Separated/Divorced	7.1	5.9	8.8
Widowed	0.9	1.0	1.1
Single	24.2	27.0	32.3
Unknown	0.0	0.1	0.4
Total	100.0	100.0	100.0

TABLE 4-1

Comparison of Mean Number of Children Ever Born per Woman  
by Age and Residence, Several Data Sets

<u>TOTAL</u>			
<u>Age</u>	<u>1984 PMCHFPS</u>	<u>1979 CPS</u>	<u>1976 WFS</u>
15-19	0.2	0.2	-
20-24	1.2	1.0	1.2
25-29	2.3	2.4	2.6
30-34	3.2	3.6	3.8
35-39	4.1	4.7	4.9
40-44	5.0	5.8	5.6

<u>URBAN</u>			
<u>Age</u>	<u>1984 PMCHFPS</u>	<u>1979 CPS</u>	<u>1976 WFS</u>
15-19	0.2	0.1	-
20-24	0.9	0.8	0.9
25-29	2.0	1.9	2.1
30-34	2.7	3.1	3.1
35-39	3.6	4.0	4.1
40-44	4.4	4.8	4.6

<u>RURAL</u>			
<u>Age</u>	<u>1984 PMCHFPS</u>	<u>1979 CPS</u>	<u>1976 WFS</u>
15-19	0.3	0.2	-
20-24	1.5	1.4	1.6
25-29	2.6	3.0	3.4
30-34	3.7	4.2	4.8
35-39	4.6	5.4	5.9
40-44	5.6	6.4	7.2



TABLE 4-2

Estimates of Fertility Rates by Residence from the  
1979 Contraceptive Prevalence Survey and the  
1984 Panama Maternal-Child Health/Family Planning Survey

	Women 15-44		
	CPS	PMCHFPS*	PMCHFPS**
Total	1979	1984	1984
GFR	137	136	146
TFR	3.9	3.7	4.0
CBR	30	31	33
95% Confidence Interval CBR	(27-33)	(29-33)	(31-35)
Urban			
GFR	103	118	120
TFR	2.7	3.2	3.2
CBR	26	31	31
95% Confidence Interval CBR	(22-30)	(28-34)	(28-34)
Rural			
GFR	175	159	176
TFR	5.2	4.3	4.8
CBR	33	30	33
95% Confidence Interval CBR	(28-38)	(28-32)	(31-35)

\*Excludes all Indians and all residents of Darien and San Blas Health Regions. These populations were not included in the survey design for the 1979 CPS.

\*\*Includes all women 15-44 regardless of residence and ethnicity.

TABLE 4-3

Percentage of Women Age 15-44 Who Ever Breastfed Their Last  
Live Birth for Women Who Had a Live Birth in the 24 Months  
Prior to Interview, by Selected Characteristics  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Characteristic</u>	<u>Total</u>		<u>Residence</u>			
			<u>Urban</u>		<u>Rural</u>	
Total	93.0	(2,071)	91.1	(734)	94.5	(1,337)
<u>Education</u>						
<Primary Complete	95.5	(490)	96.1	(64)	95.4	(426)
Primary Complete	94.0	(645)	92.7	(149)	94.6	(496)
Some Secondary	92.4	(580)	90.7	(286)	94.8	(294)
Secondary Complete	88.3	(231)	86.8	(139)	91.6	(92)
University	92.6	(125)	93.8	(96)	87.8	(29)
<u>Work Status</u>						
Not Working	93.3	(1,711)	91.2	(553)	95.6	(1,158)
Working In Home	96.7	(103)	*	(23)	95.3	(80)
Working Outside Home	90.3	(257)	89.6	(158)	91.9	(99)
<u>Ethnic Group</u>						
Indian	95.5	(305)	98.2	(44)	95.1	(261)
Non-Indian	92.8	(1,766)	90.9	(690)	94.4	(1,076)

\*<25 Cases

TABLE 4-4

Estimates of Mean Duration of Breastfeeding\* by Selected Characteristics for  
 Women Age 15-44 Who Had a Live Birth in the 24 Months Prior to Interview  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Characteristic</u>	<u>Mean Duration Breastfeeding (months)</u>	<u>No. of Cases (Unweighted)</u>
Total	10.9	(2,052)
<u>Residence</u>		
Urban	8.0	(728)
Rural	13.1	(1,324)
<u>Education</u>		
<Primary Complete	15.7	(482)
Primary Complete	12.0	(641)
Some Secondary	9.6	(575)
Secondary Complete	6.4	(230)
University	7.1	(124)
<u>Work Status</u>		
Not Working	11.6	(1,697)
Working in Home	10.3	(100)
Working Outside Home	7.1	(255)
<u>Ethnic Group</u>		
Indian	17.8	(300)
Non-Indian	10.2	(1,752)

\*Estimated by using 1-24 month prevalence/incidence method

TABLE 4-5

Comparison of Estimates of Mean Duration of Breastfeeding\* by  
Residence, 1979 and 1984

<u>Characteristic</u>	<u>1984**</u>		<u>1979***</u>	
Total	10.1	(1,655)	9.5	(566)
<u>Residence</u>				
Urban	7.8	(677)	6.0	(251)
Rural	12.2	(978)	11.7	(315)

\*Estimated by using 1-24 month prevalence/incidence method

\*\*1984 Panama Maternal-Child Health/Family Planning Survey,  
excludes all Indians and all residents of Darien and San Blas  
Provinces (not included in the 1979 survey design)

\*\*\*1979 Panama Contraceptive Prevalence Survey

TABLE 5-1

Planning Status of Last Pregnancy by Selected Characteristics:  
 Currently Married Women Age 15-44 (Percent Distribution)  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Selected Characteristics</u>	<u>Planned</u>	<u>Mistimed</u>	<u>Unwanted</u>	<u>Unknown</u>	<u>Total</u>	<u>No. of Cases (Unweighted)</u>
Total	72.9	7.7	9.4	10.0	100.0	(4,964)
<u>Residence</u>						
Urban	72.4	9.1	9.3	9.2	100.0	(1,984)
Rural	73.4	6.5	9.5	10.6	100.0	(2,980)
<u>Age</u>						
15-19	74.8	14.0	4.3	6.9	100.0	(337)
20-24	76.1	11.8	4.5	7.6	100.0	(974)
25-29	74.8	9.5	7.8	7.9	100.0	(1,144)
30-34	74.1	5.9	10.4	9.6	100.0	(969)
35-39	69.3	4.1	14.1	12.5	100.0	(858)
40-44	67.4	3.5	13.4	15.7	100.0	(682)
<u>Education</u>						
<Primary Complete	68.0	5.4	14.6	12.0	100.0	(1,273)
Primary Complete	75.3	6.1	8.2	10.4	100.0	(1,585)
Some Secondary	71.0	10.5	9.9	8.6	100.0	(1,261)
Secondary Complete	77.5	7.6	6.0	8.9	100.0	(559)
University	77.0	11.4	2.4	9.2	100.0	(286)
<u>Parity</u>						
0-1	85.7	6.6	2.2	5.5	100.0	(1,036)
2	78.3	11.3	4.4	6.0	100.0	(1,122)
3	74.3	7.5	7.5	10.7	100.0	(988)
4	65.0	8.6	13.4	13.0	100.0	(629)
5	64.7	4.6	18.0	12.7	100.0	(455)
6+	53.0	4.5	23.6	18.9	100.0	(734)
<u>Work Status</u>						
Not Working	72.8	7.9	9.6	9.7	100.0	(3,880)
Working In Home	75.9	4.4	9.4	10.3	100.0	(318)
Working Outside Home	72.6	8.0	8.4	11.0	100.0	(766)

TABLE 5-2

Comparison of Percentage of Last Pregnancies That Were  
Unwanted 1979 and 1984, by Selected Characteristics,  
Currently Married Women Age 15-44

<u>Characteristic</u>	<u>Percentage Unwanted</u>		<u>Difference 1984-1979</u>
	<u>1979*</u>	<u>1984**</u>	
<u>Total</u>	8.3	9.2	0.9
<u>Residence</u>			
Urban	7.2	9.2	2.0
Rural	9.2	9.2	0.0
<u>Age</u>			
15-19	1.0	4.2	3.2
20-24	3.3	4.5	1.2
25-29	5.6	7.7	2.1
30-34	8.6	10.2	1.6
35-39	10.9	13.7	2.8
40-44	16.9	12.8	-4.1
<u>Parity</u>			
0-1	1.1	2.0	0.9
2	2.8	4.6	1.8
3	5.0	7.2	2.2
4	9.5	13.0	3.5
5	12.9	19.0	6.1
6+	21.4	23.6	2.2
<u>Education</u>			
<Primary Complete	13.3	14.9	1.6
Primary Complete	7.6	8.1	0.5
>Primary Complete	4.6	7.8	3.2

\*1979 CPS

\*\*1984 PMCHFPS, excluding Darien and San Blas Health  
Regions (not included in 1979 CPS sample design).

Table 5-3

Current Pregnancy Intention of Currently Married Women 15-44  
by Selected Characteristics  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Characteristics</u>	<u>Currently Pregnant</u>	<u>Not Currently Pregnant</u>			<u>Total</u>	
		<u>Desire Pregnancy</u>	<u>Don't Desire Pregnancy</u>	<u>Don't Know</u>		
Total	9.0	12.8	74.1	4.1	100.0	(5,222)
<u>Residence</u>						
Urban	8.2	13.0	74.5	4.3	100.0	(2,110)
Rural	9.8	12.6	73.8	3.8	100.0	(3,112)
<u>Age</u>						
15-19	19.4	12.7	55.4	12.5	100.0	(417)
20-24	17.4	14.9	62.5	5.2	100.0	(1,057)
25-29	10.7	13.8	71.7	3.8	100.0	(1,188)
30-34	6.1	14.5	76.3	3.1	100.0	(995)
35-39	2.1	11.6	84.0	2.3	100.0	(868)
40-44	1.3	7.1	89.9	1.7	100.0	(697)
<u>Education</u>						
<Primary Complete	7.1	11.8	77.9	3.2	100.0	(1,300)
Primary Complete	8.5	11.0	77.0	3.5	100.0	(1,657)
Some Secondary	10.0	13.8	71.3	4.9	100.0	(1,345)
Secondary Complete	11.7	15.2	68.5	4.6	100.0	(603)
University	8.5	15.0	71.2	5.3	100.0	(317)
<u>Parity*</u>						
0	23.8	33.5	20.1	22.6	100.0	(423)
1	15.6	20.7	60.4	3.3	100.0	(871)
2	8.4	11.8	77.1	2.7	100.0	(1,122)
3	5.8	8.2	83.5	2.5	100.0	(988)
4	4.4	7.2	86.9	1.5	100.0	(629)
5	3.1	7.6	87.9	1.4	100.0	(455)
6	4.6	5.6	88.4	1.4	100.0	(731)
<u>Work Status</u>						
Not Working	9.7	11.8	74.6	3.9	100.0	(4,072)
Working in Home	4.6	15.6	72.6	7.2	100.0	(337)
Working Outside Home	7.7	16.3	72.6	3.4	100.0	(813)

\*Excludes 3 cases with unknown parity

TABLE 6-1

Percentage of Women Age 15-44 with Knowledge of Contraceptive  
Methods by Method, Residence and Current Marital Status  
1984 Panama Maternal-Child Health/Family Planning Survey

Contraceptive Method	Total		Urban		Rural	
	Currently Married	Not Currently Married	Currently Married	Not Currently Married	Currently Married	Not Currently Married
Female Sterilization	91.8	85.6	94.8	86.4	89.0	84.2
Male Sterilization	69.6	61.5	78.6	67.2	61.2	52.2
Pill	95.5	91.6	98.5	94.1	92.7	87.5
IUD	85.5	71.8	91.2	74.3	80.3	67.8
Condom	83.0	74.4	90.6	80.8	76.1	64.1
Injection	85.3	77.0	91.6	80.2	79.4	71.8
Foam	71.1	57.2	81.2	62.5	61.8	48.8
Diaphragm	38.4	32.9	49.8	38.2	27.8	24.4
Billings	17.6	15.2	22.9	17.0	12.6	12.4
Rhythm	46.6	40.5	59.3	48.2	34.8	28.1
Withdrawal	40.2	32.2	49.8	36.7	31.4	24.9
Number of Cases (Unweighted)	(5,222)	(2,366)	(2,110)	(1,302)	(3,112)	(1,064)



TABLE 6-2

Percentage of Currently Married Women Age 15-44 With Knowledge  
of Contraceptive Methods, by Method and Age  
1984 Panama Maternal-Child Health/Family Planning Survey

Contraceptive Method	Total	Age					
		15-19	20-24	25-29	30-34	35-39	40-44
Female Sterilization	91.8	78.3	88.8	92.0	94.8	95.0	94.6
Male Sterilization	69.6	45.4	63.0	74.6	75.6	73.3	70.4
Pill	95.5	87.5	96.0	97.0	96.7	95.7	94.4
IUD	85.5	67.1	86.7	87.0	88.0	86.2	86.8
Condom	83.0	67.9	85.3	87.5	86.5	80.4	78.5
Injection	85.3	68.8	85.4	89.3	87.8	86.3	82.0
Foam	71.1	45.9	70.6	78.6	76.4	71.1	64.8
Diaphragm	38.4	16.6	33.6	45.4	43.2	39.4	37.1
Billings	17.6	11.0	15.1	18.6	19.2	20.7	16.5
Rhythm	46.6	26.0	41.0	55.9	51.7	49.4	39.2
Withdrawal	40.2	24.4	35.8	45.6	45.3	42.5	35.6
No. of Cases (Unweighted)	(5,222)	(417)	(1,057)	(1,188)	(995)	(868)	(697)

TABLE 6-3

Percentage of Currently Married Women Age 15-44 with Knowledge  
of Contraceptive Methods by Method and Education  
1984 Panama Maternal-Child Health/Family Planning Survey

Contraceptive Method	Total	Education				
		<Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University
Female Sterilization	91.8	82.3	93.1	93.5	96.7	98.5
Male Sterilization	69.6	51.8	64.6	75.6	83.1	95.1
Pill	95.5	86.0	96.8	98.4	99.4	99.3
IUD	85.5	71.1	85.1	90.5	92.9	97.2
Condom	83.0	65.4	82.1	89.5	92.7	96.8
Injection	85.3	70.6	84.2	90.4	93.8	97.6
Foam	71.1	51.5	67.1	77.3	86.8	93.5
Diaphragm	38.4	20.5	30.2	40.9	55.7	84.5
Billings	17.6	9.9	14.4	19.1	23.0	37.5
Rhythm	46.6	22.5	34.2	55.3	71.0	92.3
Withdrawal	40.2	26.1	30.8	45.6	54.3	75.2
No. of Cases (Unweighted)	(5,222)	(1,300)	(1,657)	(1,345)	(603)	(317)

TABLE 6-4

Percent of Currently Married Women Age 15-44 With Knowledge of  
Contraceptive Methods by Method, Residence and Current Use Status  
1984 Panama Maternal-Child Health/Family Planning Survey

Contraceptive Method	Total			Urban			Rural		
	Total	Current User	Not Using	Total	Current User	Not Using	Total	Current User	Not Using
Female Sterilization	91.8	96.5	85.1	94.8	97.2	90.4	89.0	95.7	81.3
Male Sterilization	69.6	75.4	61.3	78.6	81.4	73.5	61.2	68.7	52.8
Pill	95.5	97.8	92.2	98.5	98.5	98.5	92.7	97.0	87.7
IUD	85.5	89.5	79.9	91.2	92.5	88.8	80.3	86.1	73.6
Condom	83.0	86.6	78.0	90.6	91.6	88.8	76.0	81.0	70.4
Injection	85.3	89.7	78.9	91.6	93.6	88.0	79.4	85.3	72.6
Foam	71.1	76.7	63.2	81.2	84.0	76.0	61.8	68.4	54.2
Diaphragm	38.4	42.2	33.0	49.8	52.1	45.8	27.8	31.1	24.1
Billings	17.6	19.3	15.0	22.9	23.5	21.7	12.6	14.7	10.4
Rhythm	46.6	52.0	38.9	59.3	62.1	54.3	34.8	40.8	28.1
Withdrawal	40.2	44.9	33.5	49.8	53.1	43.7	31.4	35.7	26.4
No. of Cases (Unweighted)	(5,221)	(2,958)	(2,263)	(2,210)	(1,361)	(749)	(3,111)	(1,597)	(1,514)

TABLE 7-1

Percentage of Currently Married Women Age 20-44 Currently  
Using Contraception by Method and Residence from Several Data Sources

Current Use and Method	Total			Urban			Rural		
	WFS 1976	CPS 1979	PMCHFPS 1984***	WFS 1976	CPS 1979	PMCHFPS 1984	WFS 1976	CPS 1979	PMCHFPS 1984
Currently Using	57.0	63.4	63.6	65.2	70.8	67.1	46.8	57.1	59.7
Sterilization	23.9	32.3	37.4	25.9	31.9	37.5	21.4	32.8	37.3
Orals	18.7	18.9	12.5	22.0	23.8	14.0	14.5	14.8	10.9
IUD	4.0	3.8	6.2	5.2	5.5	7.5	2.4	2.4	4.7
Rhythm	2.5	2.9	2.2	3.0	3.3	2.6	1.9	2.6	1.6
Condom	1.3	1.8	1.7	2.0	2.1	1.4	0.5	1.4	2.0
Withdrawal	2.9	1.4	1.4	2.0	0.3	1.3	4.1	2.4	1.5
Others*	3.7	2.2	2.2	5.1	3.9	2.8	2.0	0.8	1.7
Not Currently Using**	43.0	36.6	36.4	34.8	29.2	32.9	53.2	42.9	40.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

\*Includes injections, diaphragm, foam, and tablets.

\*\*Includes douche and other ineffective methods.

\*\*\*Excludes all Indians and all residents of Darien and San Blas Health Regions. These populations were not included in the survey designs of the 1979 CPS and 1976 WFS

TABLE 7-2

Percentage of Currently Married Women Age 15-44 Currently  
Using Contraception by Method and Residence  
1979 Contraceptive Prevalence Survey and  
1984 Panama Maternal-Child Health/Family Planning Survey

Current Use and Method	Total		Urban		Rural	
	CPS	PMCHFPS	CPS	PMCHFPS	CPS	PMCHFPS
	1979	1984****	1979	1984	1979	1984
<u>Currently Using</u>	60.6	61.1	67.1	65.0	55.0	56.9
Sterilization*	29.7	35.1	29.0	35.5	30.3	34.6
Orals	19.0	12.6	23.7	14.3	14.9	10.9
IUD	3.7	6.2	5.5	7.4	2.2	4.8
Rhythm	2.9	2.1	3.1	2.5	2.7	1.6
Condom	1.7	1.7	1.9	1.4	1.5	2.0
Withdrawal	1.4	1.4	0.3	1.3	2.4	1.5
Others**	2.2	2.0	3.7	2.6	1.0	1.5
<u>Not Currently Using***</u>	39.4	38.9	32.9	35.0	45.0	43.1
Total	100.0	100.0	100.0	100.0	100.0	100.0

\*Includes all female and male sterilizations.

\*\*Includes injections, diaphragms, foam, and tablets.

\*\*\*Includes douche and other ineffective methods.

\*\*\*\*Excludes all Indians and all residents of Darien and San Blas  
Health Regions. These populations were not included in the survey  
design of the 1979 CPS.

TABLE 7-3

Currently Married Women Age 15-44 Currently Using  
Contraception by Residence, and Method  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Current Use and Method</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
<u>Currently Using</u>	<u>58.8</u>	<u>64.6</u>	<u>53.6</u>
Female Sterilization	33.1	34.5	31.8
Male Sterilization	0.4	0.6	0.2
Orals	12.2	14.3	10.3
IUD	5.8	7.3	4.4
Condom	1.6	1.4	1.8
Injection	0.7	1.0	0.5
Foam	1.1	1.4	0.9
Diaphragm	0.0	0.0	0.1
Rhythm	2.3	2.4	2.1
Withdrawal	1.4	1.4	1.4
Other	0.2	0.3	0.1
<u>Not Currently Using</u>	<u>41.2</u>	<u>35.4</u>	<u>46.4</u>
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(5,221)	(2,110)	(3,111)

TABLE 7-4

Percentage of Currently Married Women Age 15-44 Currently  
Using Contraception by Residence and Selected Characteristics  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Total</u>	<u>Total</u> 58.8 (5,221)	<u>Urban</u> 64.5 (2,110)	<u>Rural</u> 53.3 (3,111)
<u>Age Groups</u>			
15-19	23.5 (417)	28.0 (128)	20.8 (289)
20-24	43.7 (1,056)	46.7 (416)	40.4 (640)
25-29	57.4 (1,188)	65.8 (514)	48.5 (674)
30-34	65.4 (995)	68.8 (437)	62.1 (558)
35-39	74.6 (868)	80.2 (344)	69.6 (524)
40-44	72.7 (697)	78.7 (271)	67.5 (426)
<u>Education</u>			
<Primary Complete	53.2 (1,300)	67.7 (233)	49.6 (1,067)
Primary Complete	59.7 (1,657)	67.2 (472)	55.7 (1,185)
Some Secondary	59.1 (1,345)	62.6 (758)	52.9 (587)
Secondary Complete	60.2 (602)	61.6 (398)	56.5 (204)
University	65.8 (317)	68.0 (249)	55.9 (68)
<u>No. of Living Children*</u>			
0	14.9 (422)	18.8 (198)	9.9 (224)
1	39.6 (871)	43.1 (398)	35.6 (473)
2	61.7 (1,122)	68.2 (524)	53.9 (598)
3	74.1 (988)	82.5 (431)	65.4 (557)
4-5	71.6 (1,084)	81.7 (388)	64.1 (696)
6+	64.6 (731)	77.1 (170)	59.7 (561)
<u>Work Status</u>			
Not Working	57.2 (4,071)	62.9 (1,491)	52.8 (2,580)
Working In Home	58.9 (337)	69.6 (94)	53.1 (243)
Working Outside Home	65.3 (813)	68.3 (525)	57.9 (288)

\*Excludes 3 records with unknown number of living children

TABLE 7-5

Currently Married Women Age 15-44 Currently  
Using Contraception by Method and Ethnic Group  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Current Use and Method</u>	<u>Total</u>	<u>Non Indian</u>	<u>Indian</u>
Currently Using	58.8	60.9	28.2
Female Sterilization	33.1	34.7	11.1
Male Sterilization	0.4	0.4	0.3
Orals	12.2	12.7	5.3
IUD	5.8	6.0	2.4
Condom	1.6	1.6	0.8
Injection	0.7	0.8	0.1
Foam	1.1	1.2	0.0
Diaphragm	0.0	0.0	0.0
Rhythm	2.3	2.0	5.4
Withdrawal	1.4	1.4	2.0
Other	0.2	0.1	0.8
Not Currently Using	41.2	39.1	71.8
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(5,221)	(4,673)	(548)



TABLE 7-6

Currently Married Women Age 15-44 Currently Using Contraception  
by Age and Method  
1984 Panama Maternal-Child Health/Family Planning Survey

Current Use and Method	Total	Age Group					
		15-19	20-24	25-29	30-34	35-39	40-44
Currently Using	58.8	23.5	43.7	57.4	65.4	74.6	72.7
Female Sterilization	33.1	0.4 ✓	4.4 ✓	21.6	43.8	62.8	59.8
Male Sterilization	0.4	0.0	0.2 ✓	0.3	0.6	0.3	0.7
Orals	12.2	13.0	19.6	19.2	9.4	4.2	2.9
IUD	5.8	5.6	11.0	7.1	4.0	2.7	2.4
Condom	1.6	1.0 ✓	2.2 ✓	1.7	1.6	1.5	0.8
Injection	0.7	0.2 ✓	1.2 ✓	1.0	0.7	0.2	0.5
Foam	1.1	0.5 ✓	1.4 ✓	1.6	1.7	0.4	0.5
Diaphragm	0.0	0.0	0.1 ✓	0.0	0.0	0.0	0.0
Rhythm	2.3	1.4	2.0	3.2	1.9	1.3	3.3
Withdrawal	1.4	1.2	1.4	1.6	1.7	1.0	1.4
Other	0.2	0.2 ✓	0.2 ✓	0.1	0.0	0.2	0.4
Not Using	41.2	76.5	56.3	42.6	34.6	25.4	27.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(5,221)	(417)	(1,056)	(1,188)	(995)	(868)	(697)

TABLE 7-7

Currently Married Women Age 15-44 Currently Using Contraception  
by Number of Living Children\* and Method  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Current Use and Method</u>	<u>Total</u>	<u>Number of Living Children</u>					
		<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4-5</u>	<u>6+</u>
<u>Currently Using</u>	<u>58.8</u>	<u>14.9</u>	<u>39.4</u>	<u>61.8</u>	<u>74.1</u>	<u>71.5</u>	<u>64.6</u>
Female Sterilization	33.1	0.9	3.9	24.5	48.3	55.2	51.0
Male Sterilization	0.4	0.4	0.1	0.5	0.4	0.5	0.1
Orals	12.2	6.3	18.0	18.2	12.3	7.8	4.4
IUD	5.8	1.6	8.5	9.2	6.5	2.5	3.0
Condom	1.6	0.4	1.8	2.8	1.0	1.2	1.2
Injection	0.7	0.4	1.3	1.2	0.6	0.3	0.2
Foam	1.1	0.8	1.8	1.7	0.9	0.4	0.7
Diaphragm	0.0	0.0	0.0	0.1	0.0	0.0	0.0
Rhythm	2.3	2.5	3.1	2.0	2.2	1.7	2.3
Withdrawal	1.4	1.6	0.8	1.2	1.6	1.8	1.6
Other	0.2	0.0	0.1	0.4	0.3	0.1	0.1
<u>Not Currently Using</u>	<u>41.2</u>	<u>85.1</u>	<u>60.6</u>	<u>38.2</u>	<u>25.9</u>	<u>28.5</u>	<u>35.4</u>
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(5,221)	(422)	(871)	(1,122)	(988)	(1,084)	(731)

\*Excludes 3 records with unknown number of living children

TABLE 7-8

Currently Married Women Age 15-44 Currently Using  
Contraception by Education and Method  
1984 Panama Maternal-Child Health/Family Planning Survey

Current Use and Method	Total	Education				
		<Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University
Currently Using	58.8	53.2	59.7	59.1	60.2	65.8
Female Sterilization	33.1	39.0	37.4	28.8	25.8	26.4
Male Sterilization	0.4	0.2	0.2	0.6	0.4	0.6
Orals	12.2	5.7	11.0	15.2	20.0	11.0
IUD	5.8	2.2	4.4	8.1	6.8	11.5
Condom	1.6	1.2	1.9	1.4	1.1	2.6
Injection	0.7	0.2	0.3	0.7	1.5	2.8
Foam	1.1	0.2	0.9	1.2	1.8	2.9
Diaphragm	0.0	0.0	0.0	0.0	0.1	0.0
Rhythm	2.3	2.0	1.9	1.9	1.9	6.7
Withdrawal	1.4	2.4	1.5	0.8	0.8	1.3
Other	0.2	0.1	0.2	0.4	0.0	0.0
Not Currently Using	41.2	46.8	40.3	40.9	39.8	34.2
Total	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(5,221)	(1,300)	(1,657)	(1,345)	(602)	(317)

TABLE 7-9

Percentage of Currently Married Women Age 15-44 Currently  
Using Contraception by Education and Selected Characteristics  
1984 Panama Maternal-Child Health/Family Planning Survey

	Education											
	Total		<Primary Complete		Primary Complete		Some Secondary		Secondary Complete		University	
<u>Total</u>	58.8	(5,221)	53.2	(1,300)	59.7	(1,657)	59.1	(1,345)	60.2	(602)	65.8	(317)
<u>Age Group</u>												
15-19	23.5	(417)	19.2	(84)	20.6	(166)	27.0	(138)	27.1	(28)	*	(1)
20-24	43.7	(1,056)	36.9	(141)	36.6	(322)	47.9	(393)	46.6	(138)	49.8	(62)
25-29	57.4	(1,188)	41.1	(214)	56.4	(331)	63.3	(332)	58.8	(206)	62.3	(105)
30-34	65.4	(995)	58.2	(255)	69.0	(315)	65.3	(227)	64.2	(111)	72.4	(87)
35-39	74.6	(868)	64.8	(322)	79.6	(273)	76.9	(168)	84.6	(72)	75.9	(33)
40-44	72.7	(697)	60.4	(284)	79.4	(250)	83.4	(87)	75.1	(47)	77.2	(29)
<u>Residence</u>												
Urban	64.5	(2,110)	67.7	(233)	67.2	(472)	62.6	(758)	61.6	(398)	68.0	(249)
Rural	53.3	(3,111)	49.6	(1,067)	55.7	(1,185)	52.9	(587)	56.5	(204)	55.9	(68)
<u>No. of Living Children**</u>												
0	14.9	(422)	14.6	(48)	12.0	(121)	13.5	(128)	17.0	(79)	20.9	(46)
1	39.6	(871)	18.7	(89)	36.1	(239)	36.0	(285)	45.5	(165)	59.2	(93)
2	61.7	(1,122)	43.7	(168)	56.2	(331)	63.4	(358)	73.9	(170)	73.4	(95)
3	74.1	(988)	58.2	(195)	73.7	(338)	78.0	(292)	79.6	(111)	88.6	(52)
4-5	71.6	(1,084)	63.1	(385)	70.2	(396)	80.9	(210)	80.8	(64)	91.9	(29)
6+	64.6	(731)	57.9	(413)	74.6	(231)	64.5	(72)	*	(13)	*	(2)
<u>Work Status</u>												
Not Working	57.2	(4,071)	54.5	(1,092)	58.7	(1,386)	56.4	(1,063)	58.8	(375)	61.1	(155)
Working In Home	58.9	(337)	47.0	(114)	63.5	(127)	66.6	(69)	*	(23)	*	(4)
Working Out- Side Home	65.3	(813)	49.1	(94)	64.2	(144)	69.2	(213)	63.9	(204)	70.1	(158)

\* < 25 Cases

\*\*Excludes 3 records with unknown number of living children.

TABLE 7-10

Currently Married Women Age 15-44 Currently Using  
Contraception by Method and Work Status  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Current Use and Method</u>	<u>Total</u>	<u>Work Status</u>		
		<u>Not Working</u>	<u>Working In Home</u>	<u>Working Outside Home</u>
<u>Currently Using</u>	<u>58.8</u>	<u>57.2</u>	<u>58.9</u>	<u>65.3</u>
Female Sterilization	33.1	31.7	36.9	37.8
Male Sterilization	0.4	0.3	0.0	0.8
Orals	12.2	12.5	9.6	11.8
IUD	5.8	5.6	4.8	6.8
Condom	1.6	1.5	0.6	2.1
Injection	0.7	0.6	0.7	1.5
Foam	1.1	1.0	1.9	1.5
Diaphragm	0.0	0.0	0.0	0.0
Rhythm	2.3	2.1	3.8	2.5
Withdrawal	1.4	1.7	0.6	0.5
Other	0.2	0.2	0.0	0.0
<u>Not Currently Using</u>	<u>41.2</u>	<u>42.8</u>	<u>41.1</u>	<u>34.7</u>
Total	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(5,221)	(4,071)	(337)	(813)

TABLE 7-11

Percentage of Currently Married Women Aged 15-44 Currently Using  
Contraception, by Method: Countries With Survey Data Available  
Mexico, Central America, Panama and The Caribbean

Current Use and Method	Puerto Rico (1982)	Costa Rica (1981)*	Panama (1984)	Mexico (1982*)	Dominican Republic (1983*)	Honduras (1984)	El Salvador (1978)	Guatemala (1983)
<u>Currently Using</u>	<u>70.4</u>	<u>65.1</u>	<u>58.8</u>	<u>47.7</u>	<u>45.8</u>	<u>34.9</u>	<u>34.4</u>	<u>25.0</u>
Orals	9.3	20.6	12.2	14.2	8.6	12.7	8.7	4.7
Sterilization	44.1	17.8	33.5	13.7	27.5	12.3	18.0	11.1
IUD	4.1	5.7	5.8	6.6	3.8	3.8	3.3	2.6
Condom	4.6	8.4	1.6	0.9	1.5	0.9	1.5	1.2
Rhythm	5.5	6.2	2.3	3.8	1.1	2.9	1.7	3.4
Other Methods	2.8	6.5	3.4	8.5	3.3	2.4	1.2	2.0
<u>Not Currently Using</u>	<u>29.6</u>	<u>34.9</u>	<u>41.2</u>	<u>52.3</u>	<u>54.2</u>	<u>65.1</u>	<u>65.6</u>	<u>75.0</u>
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Married Women in the sample	(1,557)	(2,593)	(5,221)	(6,059)	(2,603)	(2,639)	(1,476)	(2,709)

\*Women 15-49 years of age. .

NOTE: Subtotals may not add to total due to rounding.

TABLE 8-1

Percentage of Ever-Married Women, Age 15-44 Contraceptively Sterilized by  
Various Ever-Married Demographic and Social Characteristics  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Selected Characteristics</u>	<u>All Ever Married</u>		<u>No. of Women</u>
	<u>% Sterilized</u>	<u>% Using Other Efficient Methods</u>	
Total	33.0	19.5	(5,756)
<u>Age</u>			
15-19	0.3	19.2	(457)
20-24	4.7	32.1	(1,165)
25-29	21.6	28.5	(1,292)
30-34	43.3	15.8	(1,079)
35-39	61.4	8.3	(968)
40-44	59.4	6.0	(795)
<u>Current Residence</u>			
Urban	34.5	22.9	(2,369)
Rural	31.5	16.2	(3,387)
<u>Education</u>			
<Primary Complete	38.6	9.0	(1,408)
Primary Complete	37.0	17.2	(1,810)
Some Secondary	29.4	24.2	(1,520)
Secondary Complete	25.9	28.0	(662)
University	26.4	26.1	(356)
<u>Age at First Marriage</u>			
<15	32.9	14.3	(657)
15-17	34.0	19.4	(1,837)
18-19	31.9	22.0	(1,190)
20-21	31.9	22.0	(830)
22-24	32.6	21.1	(645)
25+	35.6	15.0	(485)

TABLE 8-1 Continued

<u>Selected Characteristics</u>	<u>All Ever Married</u>		<u>No. of Women</u>
	<u>% Sterilized</u>	<u>% Using Other Efficient Methods</u>	
<u>Duration Since First Marriage*</u>			
<5	4.3	27.6	(1,454)
5-9	19.3	28.7	(1,311)
10-14	43.2	17.4	(1,099)
15-19	59.4	9.3	(876)
20-24	61.6	7.2	(603)
25+	61.8	4.8	(301)
<u>Children Ever Born</u>			
0-1	2.7	22.0	(1,414)
2	23.6	29.8	(1,195)
3	48.9	20.1	(1,078)
4	53.9	14.7	(661)
5	54.1	9.8	(492)
6+	51.1	8.0	(916)
<u>Work Status</u>			
Not Working	31.4	19.6	(4,354)
Work in Home	36.4	15.2	(390)
Work Outside Home	37.8	20.6	(1,012)
<u>Ethnic Groups</u>			
Indian	11.9	8.1	(582)
Non-Indian	34.5	20.3	(5,174)

\*Excludes 112 cases with unknown year of first marriage.



TABLE 8-2

Timing of Sterilization in Terms of Life-Cycle Characteristics  
 of 1,838 Ever-Married Sterilized Women Age 15-44  
 1984 Panama Maternal-Child Health/Family Planning Survey  
 (Percent Distribution)

<u>Timing</u>	<u>Percent</u>	<u>No. of Cases (Unweighted)</u>
<u>Year of Operation</u>		
1981-85	38.0	(701)
1976-80	32.3	(602)
1970-75	20.7	(370)
Before 1970	5.8	(101)
Unknown	3.2	(64)
<u>Age (Women) at Sterilization</u>		
<25	16.8	(313)
25-29	38.9	(706)
30-34	28.7	(521)
35-39	10.4	(196)
40+	2.0	(38)
Unknown	3.2	(64)
<u>Marriage Duration at Sterilization</u>		
<5	16.1	(287)
5-9	34.6	(625)
10-14	29.9	(542)
15-19	10.4	(204)
20+	4.8	(97)
Unknown	4.2	(83)
<u>Parity</u>		
0-1	2.1	(37)
2	15.5	(261)
3	28.2	(501)
4	18.7	(337)
5	13.5	(250)
6+	22.0	(452)
<u>Interval (Months) Since Last Birth</u>		
<1	45.8	(850)
1-12	27.5	(506)
13-24	4.2	(80)
25-26	3.4	(65)
37-48	3.4	(59)
49-60	2.9	(48)
61+	12.7	(229)
Unknown	0.1	(1)

TABLE 8-3

Mean Number of Children Ever Born to Ever-Married Women Age 15-44  
by Age, Years of Marriage, and to Women Who Want No More  
Children by Years of Exposure to Risk of Childbearing  
for Sterilized and Non-Sterilized Couples  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Exposure</u>	<u>Sterilized</u>		<u>Non-Sterilized</u>		<u>Difference</u>
<u>Age of Woman</u>					
15-19	*	(1)	0.9	(456)	-
20-24	2.7	(54)	1.7	(1,111)	1.0
25-29	3.4	(282)	2.4	(1,010)	1.0
30-34	3.8	(461)	3.1	(618)	0.7
35-39	4.3	(572)	4.4	(396)	-0.1
40-44	5.2	(468)	5.2	(327)	0.0
<u>Years Since First Marriage</u>					
<5	2.6	(59)	1.2	(1,395)	1.4
5-9	2.9	(251)	2.3	(1,060)	0.6
10-14	3.7	(456)	3.3	(643)	0.4
15-19	4.1	(498)	4.4	(378)	-0.3
20-24	5.1	(363)	5.4	(240)	-0.3
25+	6.4	(186)	6.8	(115)	-0.4
<u>Years of Exposure</u> (Among those Wanting No More Births)**					
<5	2.6	(287)	2.0	(280)	0.6
5-9	3.7	(625)	2.8	(484)	0.9
10-14	4.6	(542)	3.8	(362)	0.8
15-19	5.8	(204)	5.1	(229)	0.7
20+	7.4	(97)	6.3	(218)	1.1

\* <25 Cases

\*\*For sterilized couples, exposure is defined as years married at the time of the operation; for nonsterilized couples, exposure is simply the number of years since first marriage.

TABLE 8-4

Percent Distribution of Women Who Had a Tubal Sterilization Who  
Are Satisfied with Their Decision to Have the Operation by Residence and Education  
1984 Panama Maternal-Child Health/Family Planning Survey

Satisfied With Decision	Total	Residence		Education				
		Urban	Rural	Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University
Definitely Yes	82.0	81.8	82.2	82.6	83.4	80.7	80.4	79.3
Think So	9.5	9.4	9.5	9.7	8.4	11.2	7.5	10.6
Indifferent	1.1	0.8	1.4	1.5	1.2	0.7	0.6	1.8
Think Not	3.8	3.8	3.9	2.9	3.7	3.6	7.5	3.6
Definitely No	2.6	3.0	2.1	2.0	2.3	2.9	3.4	3.8
Unknown	1.0	1.2	0.9	1.3	1.0	0.9	0.6	0.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of Cases (Unweighted)	(1,514)	(700)	(814)	(415)	(505)	(374)	(141)	(79)

TABLE 8-5

Percent Distribution of Women Who Had a Tubal Sterilization  
Who Would Like to Have an Operation So They Could Have More Children by Residence and Education  
1984 Panama Maternal-Child Health/Family Planning Survey

Like to Have Operation So Can Have More Children	Total	Residence		Education				
		Urban	Rural	<Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University
Yes	11.6	10.9	12.3	13.2	9.8	13.0	12.7	6.6
No	83.5	85.2	81.5	82.5	84.4	81.2	85.5	89.4
Don't Know	4.3	3.5	5.3	3.6	5.2	5.0	1.8	4.0
Unknown	0.6	0.4	0.9	0.7	0.6	0.8	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of Cases (Unweighted)	(1,514)	(700)	(814)	(415)	(505)	(374)	(141)	(79)

TABLE 8-6

Percent of Currently Married, Fecund Women Age 15-44 Who Want No More  
Children, Who are Interested in Sterilization, by  
Selected Characteristics and Residence  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Selected Characteristics</u>	<u>Total</u>		<u>Urban</u>		<u>Rural</u>	
Total	75.4	(1,340)	76.9	(479)	74.2	(861)
<u>Age</u>						
15-19	58.9	(61)	*	(16)	52.1	(45)
20-24	83.5	(268)	85.0	(93)	82.3	(175)
25-29	84.3	(400)	85.7	(142)	83.2	(258)
30-34	78.6	(275)	79.0	(110)	78.1	(165)
35-39	69.1	(187)	73.8	(62)	66.1	(125)
40-44	47.4	(149)	43.4	(56)	50.8	(93)
<u>Education</u>						
<Primary Complete	67.7	(383)	80.1	(48)	65.4	(335)
Primary Complete	78.2	(430)	73.2	(101)	80.4	(329)
Some Secondary	76.4	(345)	75.8	(203)	77.6	(142)
Secondary Complete	85.4	(130)	87.2	(83)	80.8	(47)
University	67.0	(52)	68.0	(44)	*	(4)
<u>No. of Living Children**</u>						
1	63.6	(96)	66.4	(41)	61.0	(55)
2	79.1	(349)	80.7	(174)	76.7	(175)
3	82.1	(303)	80.6	(114)	83.3	(189)
4-5	74.4	(337)	72.6	(96)	75.5	(241)
6+	67.1	(251)	69.9	(52)	66.1	(199)
<u>Work Status</u>						
Not Working	77.0	(1,103)	79.4	(352)	75.4	(751)
Working In Home	69.1	(75)	*	(17)	64.9	(58)
Working Outside Home	68.2	(162)	68.3	(110)	67.7	(52)
<u>Contraceptive Use</u>						
Currently Using	75.6	(601)	75.2	(286)	76.1	(315)
Not Using	75.3	(739)	79.7	(193)	73.1	(546)

\*<25 Cases

\*\*Excludes 4 cases with no living children.

TABLE 8-7

Percent of Currently Married, Fecund Women Age 15-44, Who Want No More Children, Who Are Interested in Sterilization and Who Have Knowledge of Where to Obtain Sterilization Information and/or Services, by Selected Characteristics  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Selected Characteristics</u>	<u>Percent</u>	
Total	75.6	(983)
<u>Residence</u>		
Urban	75.8	(364)
Rural	75.4	(619)
<u>Age</u>		
15-19	52.6	(35)
20-24	64.5	(214)
25-29	73.9	(331)
30-34	85.1	(212)
35-39	87.2	(121)
40-44	79.9	(70)
<u>Education</u>		
<Primary Complete	74.0	(243)
Primary Complete	73.6	(333)
Some Secondary	75.0	(263)
Secondary Complete	82.4	(109)
University	83.0	(35)
<u>No. of Living Children**</u>		
1	65.4	(59)
2	69.8	(272)
3	77.0	(242)
4-5	79.8	(244)
6+	83.0	(163)
<u>Work Status</u>		
Not Working	75.4	(825)
Working in Home	75.5	(46)
Working Outside Home	76.9	(112)
<u>Contraceptive Use</u>		
Currently Using	73.8	(452)
Not Using	77.3	(531)

\*<25 Cases

\*\*Excludes 3 cases with no living children.

TABLE 8-8

Percent Distribution of Currently Married, Fecund Women Age 15-44  
 Who Want No More Children, Who Are Interested in Sterilization,  
 and Who Have Knowledge of Where to Obtain Sterilization Information  
 and/or Services, by Source of Information/Services and Residence  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Source of Information/Services</u>	<u>Total</u>	<u>Urban</u>	<u>Rural</u>
Centro de Salud sin cama	39.9	37.2	42.2
Hospital Integrado	13.9	5.9	20.5
Hospital Seguro Social	12.3	18.2	7.4
Consultorio y hospitales particulares	7.8	10.9	5.2
Hospital-Other	7.2	5.0	9.0
Hospital Santo Tomas	6.9	11.9	2.8
Centro de Salud con cama	5.4	3.8	6.7
Policlinica del Seguro Social	3.3	4.9	2.0
Puesto de Salud	0.5	0.7	0.3
Subcentro de Salud	0.1	0.0	0.2
Other	0.9	0.5	1.3
Unknown	1.8	1.0	2.4
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(751)	(282)	(469)

TABLE 8-9

Percent Distribution of Reason Never Sterilized, by Residence, for  
 Currently Married, Fecund Women Age 15-44 Who Want No More Children,  
 Who Are Interested in Sterilization, and Who Have Knowledge  
 of Where to Obtain Sterilization Information and/or Services  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Reason Never Sterilized</u>	<u>Total</u>	<u>Urban</u>	<u>Rural</u>
Physician Refusal—too young	25.5	30.9	21.0
Economics	14.0	8.1	18.8
Currently Pregnant/Postpartum	13.0	12.2	13.8
Presently Going to Set It Up	10.8	13.4	8.7
Inconvenient/No Time	7.6	7.3	7.9
Doesn't Want It	4.9	5.8	4.1
Fears Operation	4.8	5.3	4.4
Husband Against	3.8	4.3	3.4
Waiting for Children to Grow-Up	3.4	2.8	4.0
Health Reasons	2.6	2.8	2.5
Prefers to Use Other Method	1.2	1.7	0.8
Other	7.1	4.3	9.3
Unknown	1.3	1.1	1.3
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(751)	(282)	(469)



TABLE 8-10

Percentage Distribution of Currently Married Fecund Women Age  
15-44 Who Want to Have More Children, Who Are Interested in  
Sterilization After They Have All the Children They Want, by Residence

Interested in Having the Operation	<u>Total</u>	<u>Urban</u>	<u>Rural</u>
Yes	75.5	85.6	67.9
No	15.3	8.4	20.5
Undecided	<u>9.2</u>	<u>6.0</u>	<u>11.6</u>
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(800)	(277)	(523)

TABLE 9-1

Source of Contraception by Residence for Current Users of  
Contraception: Currently Married Women Age 15-44  
1984 Panama Maternal-Child Health/Family Planning Survey  
(Percent Distribution)

A. Users of Female Sterilization (Tubal Sterilizations in past 5 years only)

<u>Source</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
Integrated Hospital	41.4	28.8	55.2
Santo Tomas Hospital	24.1	35.0	12.1
Social Security Hospital	16.6	23.2	9.4
Private Hospital	11.0	10.7	11.3
Other	6.1	2.0	10.7
Unknown	0.8	0.3	1.3
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(597)	(278)	(319)

B. Users of Other Methods

<u>Source</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
MOH Health Center/Post	34.4	26.5	44.7
Private Pharmacy	29.4	34.8	22.3
Social Security	12.0	15.1	8.0
Private Doctor or Hospital	6.2	8.0	3.8
MOH Hospital	3.0	1.7	4.8
APLFA (San Miguelito)	0.5	1.0	0.0
Other*	12.7	11.6	14.0
Unknown	1.8	1.3	2.4
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(1,289)	(622)	(667)

\*Includes couples using Billings, Rhythm, or Withdrawal

TABLE 9-2

Source of Contraception by Education for Current Users of  
Contraception: Currently Married Women Age 15-44  
1984 Panama Maternal-Child Health/Family Planning Survey  
(Percent Distribution)

A. Users of Female Sterilization (Tubal Sterilizations in past 5 years only)

Source	Total	Education				
		<Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University
Integrated Hospital	41.4	57.4	45.5	35.8	32.9	17.1
Santo Tomas Hospital	24.1	21.6	21.4	29.6	25.7	18.1
Social Security Hospital	16.6	6.7	16.4	20.9	18.3	25.1
Private Hospital	11.0	5.5	8.8	9.2	13.0	37.7
Other	6.1	7.6	7.2	4.1	10.0	0.0
Unknown	0.8	1.2	0.7	0.4	0.1	2.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(597)	(135)	(178)	(173)	(71)	(40)

B. Users of Other Methods

Source	Total	Education				
		<Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University
MOH Health Center/Post	34.4	39.2	44.4	36.4	25.5	13.4
Private Pharmacy	29.4	16.8	26.0	31.4	37.8	32.1
Social Security	12.0	8.4	8.4	12.2	19.0	13.3
Private Doctor or Hospital	6.2	1.5	2.7	5.8	9.3	15.6
MOH Hospital	3.0	3.9	4.3	2.8	2.1	1.4
APLAF (San Miguelito)	0.5	0.0	0.4	0.7	0.0	1.6
Other*	12.7	24.7	12.8	9.5	4.8	20.8
Unknown	1.8	5.5	1.0	1.2	1.5	1.8
Total	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(1,289)	(185)	(371)	(404)	(205)	(124)

\*Includes couples using Billings, Rhythm, or Withdrawal

TABLE 9-3

Source of Contraception, by Selected Methods for Current Users of  
 Contraception: Currently Married Women Age 15-44  
 1984 Panama Maternal-Child Health/Family Planning Survey  
 (Percent Distribution)

Source of Contraception	Selected Methods		
	Orals	IUD	Condom
Ministry of Health Hospital	3.0	5.4	0.9
MOH Health Center/Post	36.5	53.0	26.9
Social Security	12.0	19.1	11.1
Private Doctor or Hospital	2.7	14.3	3.4
Private Pharmacy	43.3	0.6	51.6
APLAF (San Miguelito)	0.0	2.1	0.0
Other	2.5	5.0	4.9
Unknown	0.0	0.5	1.2
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(606)	(275)	(86)

TABLE 9-4

Panama 1979\* and 1984\*\* Source of Contraception, by Selected Methods,  
for Current Users of Contraception Currently Married Women Age 15-44  
(Percent Distribution)

Source of Contraception	Orals		IUD		Condom	
	1979	1984	1979	1984	1979	1984
Ministry of Health Hospital	11.8	2.7	13.0	5.1	6.6	1.0
MOH Health Center/Post	47.4	35.4	46.4	53.3	19.5	25.7
Social Security	9.5	12.0	11.4	18.8	3.9	10.4
Private Doctor or Hospital	10.6	2.8	23.9	14.8	0.0	3.6
Private Pharmacy	17.4	44.9	0.0	0.6	64.7	53.8
APLAFA	—	0.0	—	2.2	—	0.0
Other	1.4	2.2	3.6	4.9	5.3	4.4
Unknown	1.9	0.0	1.8	0.3	0.0	1.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(315)	(547)	(67)	(258)	(27)	(81)

\*1979 Panama Contraceptive Prevalence Survey

\*\*1984 Panama Maternal-Child Health/Family Planning Survey, excluding Women  
Age 45-49, all Indians, and the Darien and San Blas Health Regions (not  
included in the 1979 CPS Survey design)

TABLE 9-5

Time to Get to Source of Contraception, by Current Contraceptive  
 Use Status and Residence: Currently Married Women Age 15-44  
 1984 Panama Maternal-Child Health/Family Planning Survey  
 (Percent Distribution)

Contraceptive Use Status and Residence	Total	Time to Source of Contraception				No. of Cases (Unweighted)
		1-15 Minutes	16-30 Minutes	31+ Minutes	Unknown	
<u>All Women</u>	100.0	49.8	20.1	21.9	8.2	(2,064)
Urban	100.0	57.4	20.7	13.5	8.4	(888)
Rural	100.0	41.8	19.5	30.6	8.1	(1,176)
<u>Current Users*</u>	100.0	51.1	19.3	20.2	9.4	(1,103)
Urban	100.0	58.6	19.9	12.2	9.7	(538)
Rural	100.0	41.2	18.5	30.6	8.9	(565)
<u>Nonusers**</u>	100.0	48.0	21.1	24.0	6.9	(961)
Urban	100.0	55.5	21.9	15.6	7.0	(350)
Rural	100.0	42.2	20.4	30.6	6.8	(611)

\*Excludes women using rhythm and withdrawal.

\*\*Includes only nonusers who know of a source of contraception.

TABLE 9-6

Average Time (in Minutes) to Source of Contraception, by Current  
 Contraception Use Status and Residence: Currently Married Women Age 15-44  
 1984 Panama Maternal-Child Health/Family Planning Survey  
 (Percent Distribution)

<u>Contraceptive Use Status</u>	<u>Total</u>	<u>Urban</u>	<u>Rural</u>
<u>All Women</u>	27.7 (1,899)	21.1 (817)	34.3 (1,082)
<u>Current Users*</u>	25.9 (1,004)	19.9 (490)	33.6 (514)
<u>Nonusers**</u>	29.8 (895)	23.0 (327)	35.0 (568)

\*Excludes women using rhythm and withdrawal and those who do not know time to source.

\*\*Includes nonusers who know of a source of contraception but excludes those who do not know time to source.

TABLE 10-1

Reasons for Not Currently Using Contraception (Percent Distribution)  
 by Residence: Currently Married Women Age 15-44  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Reason for Nonuse</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
Reasons Related to Pregnancy			
<u>Fecundity &amp; Sexual Activity</u>	<u>66.8</u>	<u>68.9</u>	<u>65.1</u>
Currently Pregnant	21.8	22.7	21.1
Postpartum, Breastfeeding	15.6	10.4	19.2
Infrequent Sexual Relations	10.3	12.4	8.8
Subfecund/Infertile	9.8	11.5	8.6
Desires Pregnancy	8.8	11.7	6.7
Menopause	0.5	0.2	0.7
<u>Other Reasons</u>	<u>32.4</u>	<u>30.2</u>	<u>33.7</u>
Fear Side Effects	11.2	9.1	12.6
Does Not Like/Want	5.1	4.4	5.6
Medical Reasons	3.3	4.0	2.7
Husband Doesn't Permit	0.9	0.8	1.0
Other	11.9	11.9	11.8
<u>Unknown</u>	<u>0.8</u>	<u>0.9</u>	<u>1.2</u>
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(2,216)	(736)	(1,480)



TABLE 10-2

Reasons for Not Currently Using Contraception (Percent Distribution)  
by Education, Currently Married Women Age 15-44  
1984 Panama Maternal-Child Health/Family Planning Survey

Reasons for Nonuse	Total	Education				
		<Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University
<u>Reasons Related to Pregnancy</u>						
<u>Fecundity &amp; Sexual Activity</u>	66.8	61.1	64.6	70.0	74.7	66.7
Currently Pregnant	21.8	15.4	21.0	23.4	30.3	25.7
Postpartum, Breastfeeding	15.6	19.0	16.8	15.5	10.0	7.8
Infrequent Sexual Relations	10.3	8.1	9.9	12.2	10.2	11.8
Subfecund/Infertile	9.8	12.3	8.5	9.8	8.9	8.3
Desires Pregnancy	8.8	4.4	8.3	9.1	15.3	13.1
Menopause	0.5	1.9	0.1	0.0	0.0	0.0
<u>Other Reasons</u>	32.4	37.2	34.6	28.6	25.2	33.2
Fear Side Effects	11.2	15.5	12.4	7.5	10.2	6.8
Does Not Like/Want	5.1	4.8	5.4	4.9	2.6	10.3
Medical Reasons	3.3	1.8	3.2	4.6	1.9	6.2
Husband Doesn't Permit	0.9	1.6	1.1	0.4	0.7	0.0
Other	11.9	13.5	12.5	11.2	9.8	9.9
<u>Unknown</u>	0.8	1.7	0.8	1.4	0.1	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(2,216)	(634)	(681)	(559)	(240)	(102)

TABLE 10-3

Reasons for Not Currently Using Contraception (Percent Distribution)  
by Work Status, Currently Married Women Age 15-44  
1984 Panama Maternal-Child Health/Family Planning Survey

Reasons of Nonuse	Total	Work Status		
		Not Working	Working In Home	Working Outside Home
<u>Reasons Related to Pregnancy, Fecundity &amp; Sexual Activity</u>	<u>66.8</u>	<u>67.0</u>	<u>60.0</u>	<u>68.2</u>
Currently Pregnant	21.8	22.5	12.0	22.1
Postpartum, Breastfeeding	15.6	17.4	8.7	8.5
Infrequent Sexual Relations	10.3	8.7	21.1	14.6
Subfecund/Infertile	9.8	9.9	12.8	7.9
Desires Pregnancy	8.8	7.9	5.0	15.1
Menopause	0.5	0.6	0.4	0.0
<u>Other Reasons</u>	<u>32.4</u>	<u>32.1</u>	<u>36.6</u>	<u>31.7</u>
Fear Side Effects	11.2	11.8	8.7	9.2
Does Not Like/Want	5.1	4.8	4.1	6.9
Medical Reasons	3.3	3.1	4.4	3.8
Husband Doesn't Permit	0.9	0.8	1.8	0.9
Other	11.9	11.6	17.6	10.9
<u>Unknown</u>	<u>0.8</u>	<u>0.9</u>	<u>3.4</u>	<u>0.1</u>
Total	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(2,216)	(1,776)	(154)	(286)

TABLE 10-4

Percent of Nonusers\*\* That Currently Desire to Use Contraception,  
and Have Knowledge of Availability, by Selected Characteristics:  
Currently Married Women Age 15-44  
1984 Panama Maternal-Child Health/Family Planning Survey

Selected Characteristics	Percent that Currently Desire to Use Contraception		Percent of Those Who Desire to Use an Effective Method Who Know Where to Obtain Method	
Total	29.6	(775)	79.7	(177)
<u>Residence</u>				
Urban	22.8	(240)	82.4	(49)
Rural	33.9	(535)	78.3	(128)
<u>Age</u>				
15-19	32.0	(110)	*	(23)
20-24	38.6	(200)	77.3	(59)
25-29	26.8	(169)	(77.0) <sup>a</sup>	80.0 (38)
30-34	20.0	(127)	(85.4) <sup>b</sup>	* (19)
35-39	29.7	(97)	*	(24)
40-44	26.5	(72)	*	(14)
<u>Education</u>				
<Primary Complete	34.6	(256)	73.2	(62)
Primary Complete	34.4	(254)	80.5	(63)
Some Secondary	24.6	(167)	80.0	(33)
Secondary Complete	23.7	(65)	(94.6) <sup>c</sup>	* (16)
University	10.7	(33)	*	(3)
<u>Work Status</u>				
Not Working	30.8	(618)	80.4	(146)
Working In Home	33.2	(66)	(75.8) <sup>d</sup>	* (16)
Working Outside Home	21.1	(91)	*	(15)
<u>No. of Living Children</u>				
0	11.8	(90)	*	(8)
1	25.8	(162)	85.0	(34)
2	34.2	(157)	67.3	(38)
3	27.3	(117)	*	(24)
4-5	36.5	(133)	92.4	(38)
6+	40.4	(116)	75.8	(35)

\* <25 Cases

\*\*Excludes nonusers for pregnancy related reasons: currently pregnant, menopause, subfecund, surgically sterilized, desiring pregnancy, postpartum, or not sexually active.

<sup>a</sup>Combines Ages 15-29

<sup>b</sup>Combines Ages 30-44

<sup>c</sup>Combines Secondary Complete and University

<sup>d</sup>Combines Working in Home and Working Outside Home

TABLE 10-5

Nonusers\* Who Currently Desire to Use a Method (Percent Distribution)  
 by Method of Choice and Source Where Method  
 Would be Obtained by Residence: Currently Married Women Age 15-44  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Method of Choice</u>	<u>Total</u>		
	<u>Total</u>	<u>Urban</u>	<u>Rural</u>
Orals	33.5	37.1	32.0
Sterilization	14.9	14.9	14.9
IUD	13.6	17.4	11.9
Injection	12.4	12.8	12.3
Foam	2.3	4.8	1.3
Condom	1.2	0.0	1.8
Rhythm	0.4	0.0	0.6
No Preference	0.2	0.0	0.3
Other	0.9	1.5	0.6
Unknown	20.6	11.5	24.3
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(236)	(58)	(178)
 <u>Source Where Effective Method Would be Obtained**</u>			
MOH Health Center or Post	61.8	49.9	68.1
Social Security	11.3	15.0	9.4
Private Pharmacy	9.8	20.0	4.6
Ministry of Health			
Hospital	9.6	5.2	11.9
Private Doctor			
Hospital	4.7	6.4	3.8
Other	2.8	3.5	2.2
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(143)	(42)	(101)

\*Excludes nonusers who are currently pregnant, who are not sexually active, and who stated they cannot become pregnant for reasons related to subfecundity or menopause.

\*\*Excludes those who prefer to use rhythm and those who do not know where to obtain their method of choice.

TABLE 10-6

Nonusers\* Who Currently Desire to Use a Method (Percent Distribution)  
 by Method of Choice and Source Where Method Would be  
 Obtained by Education: Currently Married Women Age 15-44  
 1984 Panama Maternal-Child Health/Family Planning Survey

Method of Choice	Total	Education		
		<Primary Complete	Primary Complete	Some Secondary and Higher
Orals	33.5	32.2	35.4	32.1
Sterilization	14.9	17.8	13.5	13.1
IUD	13.6	7.1	17.5	14.6
Injection	12.4	12.6	9.4	16.1
Foam	2.3	1.4	1.2	4.4
Condom	1.2	1.1	1.2	1.5
Rhythm	0.4	0.0	1.2	0.0
No Preference	0.2	0.7	0.0	0.0
Other	0.9	0.0	1.2	1.5
Unknown	20.6	27.1	19.4	16.7
Total	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(236)	(89)	(84)	(63)

Source Where Effective Method Would be Obtained**				
MOH Health Center or Post	61.8	74.1	69.0	44.3
Social Security	11.3	7.8	5.6	19.6
Private Pharmacy	9.8	0.0	9.8	17.5
Ministry of Health Hospital	9.6	13.0	9.0	7.2
Private Doctor/Hospital	4.7	1.3	6.6	5.2
Other	2.8	3.8	0.0	6.2
Total	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(143)	(46)	(51)	(46)

TABLE 11-1

Percentage of Women Age 15-44 Who  
Are In Need of Family Planning Services\*,  
by Selected Characteristics and Residence  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Selected Characteristics</u>	<u>Total</u>		<u>Urban</u>		<u>Rural</u>	
Total	12.8	(7,588)	8.8	(3,412)	17.2	(4,176)
<u>Age</u>						
15-19	7.4	(1,648)	4.8	(793)	10.8	(855)
20-24	15.7	(1,604)	10.8	(739)	21.6	(865)
25-29	16.6	(1,411)	10.8	(633)	23.0	(778)
30-34	15.0	(1,117)	12.1	(508)	18.2	(609)
35-39	10.9	(996)	7.6	(411)	13.9	(585)
40-44	10.6	(812)	6.2	(328)	14.7	(484)
<u>Marital Status</u>						
Currently Married	16.1	(5,221)	11.2	(2,110)	20.7	(3,111)
Sep/Wid/Divorced	20.0	(534)	17.6	(259)	22.9	(275)
Never Married	2.2	(1,832)	2.0	(1,043)	2.5	(789)
<u>Education</u>						
<Primary Complete	20.2	(1,505)	9.0	(276)	23.4	(1,229)
Primary Complete	14.9	(2,136)	10.6	(619)	17.1	(1,517)
Some Secondary	10.0	(2,411)	8.2	(1,422)	13.4	(989)
Secondary Complete	8.5	(966)	7.7	(649)	10.7	(317)
University	9.8	(570)	9.3	(446)	12.1	(124)
<u>No. of Living Children**</u>						
0	2.6	(2,197)	2.6	(1,218)	2.6	(979)
1	20.2	(1,053)	16.5	(489)	24.5	(564)
2	17.8	(1,272)	14.1	(607)	22.5	(665)
3	13.1	(1,083)	8.9	(475)	17.4	(608)
4-5	15.5	(1,174)	8.2	(425)	21.1	(749)
6+	21.7	(806)	14.2	(197)	24.9	(609)
<u>Ethnic Group</u>						
Indian	29.1	(668)	10.4	(98)	33.2	(570)
Non-Indian	11.8	(6,920)	8.7	(3,314)	15.4	(3,606)
<u>Work Status</u>						
Not Working	13.4	(5,796)	9.0	(2,384)	17.6	(3,412)
Work In Home	11.2	(543)	5.2	(221)	17.2	(322)
Work Outside Home	10.7	(1,249)	9.2	(807)	14.3	(442)

\*In need of family planning services is defined as women who want no more children and who are not currently pregnant and not currently desiring pregnancy, who are not using any contraceptive method for reasons not related to pregnancy, subfecundity, or sexual activity.

\*\*Excludes 3 cases with unknown number of living children.

TABLE 11-2

Percent Distribution of Women Age 15-44 Who  
Are in Need of Family Planning Services\*, by  
Selected Characteristics and Residence  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Selected Characteristics</u>	<u>Total</u>	<u>Urban</u>	<u>Rural</u>
Total (1,070 cases)**	100.0	36.1	63.9
<u>Age</u>			
15-19	12.7	4.6	8.1
20-24	26.1	9.8	16.3
25-29	24.0	8.2	15.8
30-34	17.2	7.3	9.9
35-39	11.1	3.8	7.3
40-44	8.9	2.5	6.4
<u>Marital Status</u>			
Currently Married	84.3	28.0	56.3
Sep/Wid/Divorced	11.2	5.4	5.8
Never Married	4.5	2.6	1.9
<u>Education</u>			
<Primary Complete	26.2	2.6	23.6
Primary Complete	31.3	7.6	23.7
Some Secondary	26.2	14.2	12.0
Secondary Complete	9.4	6.3	3.1
University	6.9	5.3	1.6
<u>No. of Living Children</u>			
0	6.2	3.9	2.3
1	22.0	9.6	12.4
2	23.6	10.4	13.2
3	14.5	5.0	9.5
4-5	18.0	4.1	13.9
6+	15.7	3.0	12.7
<u>Ethnic Group</u>			
Indian	13.3	0.9	12.4
Non-Indian	86.7	35.2	51.5
<u>Work Status</u>			
Not Working	79.1	25.7	53.4
Work In Home	6.2	1.4	4.8
Work Outside Home	14.7	8.9	5.8

\*In need of family planning services is defined as women who want no more children and who are not currently pregnant and not currently desiring pregnancy, who are not using any contraceptive method for reasons not related to pregnancy, subfecundity, or sexual activity.

\*\*Unweighted number of women in sample who are in need of family planning services.

TABLE 12-1

Percentage of Women Age 15-44 Reporting 1 or More Pregnancies Ending  
Before 7 Months by Selected Characteristics and Residence  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Selected Characteristics</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
Total	13.0 (7,588)	13.0 (3,412)	13.0 (4,176)
<u>Age</u>			
15-19	1.5 (1,648)	1.2 (793)	1.9 (855)
20-24	7.5 (1,604)	7.4 (739)	7.5 (865)
25-29	15.9 (1,411)	17.1 (633)	14.6 (778)
30-34	19.8 (1,117)	21.0 (508)	18.5 (609)
35-39	20.0 (996)	20.5 (411)	19.5 (585)
40-44	25.0 (812)	25.4 (328)	24.7 (484)
<u>Education</u>			
<Primary Complete	17.5 (1,505)	12.8 (276)	18.8 (1,229)
Primary Complete	14.0 (2,136)	17.6 (619)	12.1 (1,517)
Some Secondary	10.6 (2,411)	11.6 (1,422)	8.5 (989)
Secondary Complete	12.2 (966)	12.1 (649)	12.5 (317)
University	12.5 (570)	13.1 (446)	10.1 (124)
<u>Marital Status</u>			
Married/In Union	17.1 (5,222)	18.3 (2,110)	16.0 (3,111)
Sep/Div/Widow	20.8 (534)	23.0 (259)	18.1 (275)
Never Married	0.4 (1,832)	0.5 (1,043)	0.3 (789)
<u>Work Status</u>			
Not Working	12.2 (5,796)	11.8 (2,384)	12.7 (3,412)
Working In Home	11.9 (543)	8.4 (221)	15.3 (322)
Working Outside Home	16.9 (1,249)	18.0 (807)	14.1 (442)



TABLE 12-2

Percent of Women Age 15-44 Reporting 1 or More Pregnancies Ending Before  
7 Months by Selected Characteristics and Type of Last Abortion  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Selected Characteristics</u>	<u>Spontaneous</u>	<u>Induced</u>	<u>Not Stated</u>	<u>Total</u>	<u>No. of Cases (Unweighted)</u>
Total	89.0	6.0	5.0	100.0	(990)
<u>Residence</u>					
Urban	89.1	7.3	3.6	100.0	(443)
Rural	88.9	4.5	6.6	100.0	(547)
<u>Age</u>					
15-19	*	*	*	*	(24)
20-24	85.2	7.4	7.4	100.0	(117)
25-29	89.7	7.4	2.9	100.0	(225)
30-34	91.7	4.5	3.8	100.0	(217)
35-39	85.6	7.3	7.1	100.0	(200)
40-44	90.6	4.3	5.1	100.0	(207)
<u>Marital Status</u>					
Married/In Union	89.2	5.6	5.2	100.0	(874)
Sep/Div/Widow	89.3	8.1	2.6	100.0	(108)
Never Married	*	*	*	*	(8)
<u>Education</u>					
<Primary Complete	89.6	3.8	6.6	100.0	(268)
Primary Complete	89.8	5.6	4.6	100.0	(288)
Some Secondary	86.2	8.2	5.6	100.0	(248)
Secondary Complete	95.6	3.0	1.4	100.0	(116)
University	84.1	10.4	5.5	100.0	(70)

\*<25 Cases

TABLE 12-3

Percent of Women Age 15-44 Reporting 1 or More  
Pregnancies Ending Before 7 Months by Number of Abortions and Residence  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>No. of Abortions</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
1	74.6	71.6	78.0
2	16.9	19.3	14.2
3+	8.4	9.0	7.8
Unknown	0.1	0.1	0.0
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(992)	(443)	(549)

TABLE 12-4

Percent of Women Age 15-44 Who Reported 1 or More Pregnancies Ending Before 7 Months Who Received Medical Treatment and of Those Who Received Medical Treatment the Percent Who Were Hospitalized by Residence and Education  
1984 Panama Maternal-Child Health/Family Planning Survey

	<u>% Receiving Medical Treatment</u>	<u>% Hospitalized</u>	<u>No. of Cases (Unweighted)</u>
<u>Total</u>	83.3	78.9	(992)
<u>Residence</u>			
Urban	90.1	79.8	(443)
Rural	75.8	77.8	(549)
<u>Education</u>			
Primary Complete	67.1	75.4	(268)
Primary Complete	79.6	79.6	(290)
Some Secondary	89.0	76.1	(248)
Secondary Complete	97.4	87.0	(116)
University	98.2	78.9	(70)

TABLE 12-5

Place of Treatment for Women Age 15-44 Reporting  
1 or More Pregnancies Ending Before 7 Months Who  
Received Medical Treatment, by Residence  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Place of Treatment</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
Hospital Integrado	27.2	18.7	38.6
Hospital Santo Tomas	23.3	28.5	16.4
Hospital Seguro Social	15.8	21.5	8.2
Private Clinic/Hospital	10.4	14.5	5.0
Other Hospital	9.6	5.6	15.0
Centro de Salud w/Bed	6.0	4.0	8.6
Centro de Salud w/o Bed	4.1	2.8	5.8
Social Security	1.2	1.9	0.4
Puesto de Salud	0.2	0.0	0.4
Home w/Friend/Family	0.2	0.3	0.1
Home of Midwife	0.1	0.0	0.1
Home w/Nurse/M.D.	0.1	0.0	0.2
Other	1.6	2.2	0.9
Don't Remember	0.2	0.0	0.3
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(805)	(398)	(407)

TABLE 13-1

Use and Source of Prenatal Care During Pregnancy Before Last  
Birth by Residence: Currently Married Women Age 15-44 With  
a Birth in the 5 Years Before the Interview  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Prenatal Care</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
Yes	89.4	95.3	84.6
No	10.6	4.7	15.4
No. of Cases (Unweighted)	(3,108)	(1,168)	(1,940)
Source of Prenatal Care			
Health Center w/o bed	31.7	29.2	34.0
Health Center w/bed	18.3	12.4	23.8
Private Hospital/Clinic	18.2	26.5	10.4
Social Security Hospital	12.1	17.7	7.0
Integrated Hospital	9.2	4.5	13.6
Social Security	3.4	4.3	2.5
Other Hospital	3.1	2.1	4.0
Puesto de Salud	1.1	0.0	2.0
Subcentro de Salud	0.6	0.3	1.0
Santo Tomas Hospital	0.4	0.5	0.2
Other	1.6	2.2	1.0
Unknown	0.3	0.3	0.5
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(2,719)	(1,104)	(1,615)

TABLE 13-2

Use and Source of Prenatal Care During Pregnancy Before Last  
 Birth by Education: Currently Married Women Age 15-44 with a Birth  
 in the 5 Years Before the Interview  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Prenatal Care</u>	<u>Total</u>	<u>Education</u>				
		<u>&lt;Primary Complete</u>	<u>Primary Complete</u>	<u>Some Secondary</u>	<u>Secondary Complete</u>	<u>University</u>
Yes	89.4	72.5	89.6	94.3	98.6	97.6
No	10.6	27.5	10.4	5.7	1.4	2.4
<u>No. of Cases (Unweighted)</u>	(3,108)	(744)	(940)	(877)	(357)	(190)
 <u>Source of Prenatal Care</u>						
Health Center w/o bed	31.7	34.6	36.6	35.0	21.2	14.3
Health Center w/bed	18.3	24.1	23.6	17.1	12.8	2.2
Private Hospital/Clinic	18.2	4.2	9.1	17.0	35.2	53.5
Social Security Hospital	12.1	6.1	9.3	15.0	16.3	16.0
Integrated Hospital	9.2	17.6	12.0	5.9	5.1	2.8
Social Security	3.4	0.9	2.8	3.3	5.1	7.4
Other Hospital	3.1	4.5	3.1	3.1	2.3	2.0
Puesto de Salud	1.1	4.0	0.7	0.6	0.1	0.0
Subcentro de Salud	0.6	1.2	1.3	0.2	0.0	0.0
Santo Tomas Hospital	0.4	0.7	0.1	0.4	0.6	0.0
Other	1.6	1.8	1.0	2.3	0.9	1.8
Unknown	0.3	0.3	0.4	0.1	0.4	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
 <u>No. of Cases (Unweighted)</u>	 (2,719)	 (525)	 (830)	 (827)	 (352)	 (185)

TABLE 13-3

Indicators of Prenatal Care During Pregnancy Before Last Birth by  
Residence and Education: Currently Married Women Age 15-44 With a  
Birth in the 5 Years Before the Interview

1984 Panama Maternal-Child Health/Family Planning Survey

<u>Month of First Exam</u>	<u>Total</u>	<u>Residence</u>		<u>&lt;Primary</u>	<u>Primary</u>	<u>Some</u>	<u>Secondary</u>	<u>University</u>
		<u>Urban</u>	<u>Rural</u>	<u>Complete</u>	<u>Complete</u>	<u>Secondary</u>	<u>Complete</u>	
1-3	78.9	82.9	74.9	70.9	77.1	78.4	86.7	88.9
4-6	18.2	14.9	21.5	23.6	19.7	19.4	11.0	10.3
7+ -	2.2	1.7	2.6	3.6	2.5	1.8	1.9	0.4
Unknown	0.7	0.5	1.0	1.9	0.6	0.4	0.4	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<u>Number of Visits</u>								
1	2.3	1.9	2.8	4.7	2.2	1.5	2.6	0.8
2-4	19.5	16.2	22.6	26.4	21.3	18.1	17.9	7.2
5-7	46.7	47.6	45.8	44.5	50.0	48.9	42.6	37.9
8+	28.7	32.5	25.0	21.1	23.7	28.7	34.2	52.1
Unknown	2.8	1.8	3.8	3.3	2.8	2.7	2.6	2.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(2,719)	(1,104)	(1,615)	(525)	(829)	(829)	(352)	(185)

TABLE 13-4

Month of Pregnancy When First Received Prenatal Care by Source  
of Prenatal Care (Percent Distribution): Currently Married Women  
Age 15-44 Who Had a Birth During the 5 Years Before the Interview  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Source of Prenatal Care</u>	<u>Total</u>	<u>Month of Pregnancy</u>				<u>No. of Cases (Unweighted)</u>
		<u>1-3</u>	<u>4-6</u>	<u>7+</u>	<u>Unknown</u>	
Santo Tomas Hospital	*	*	*	*	*	10
Social Security Hospital	100.0	84.4	13.9	0.7	1.0	299
Integrated Hospital	100.0	70.5	24.8	3.3	1.4	359
Other Hospital	100.0	84.2	12.8	3.0	0.0	92
Health Center w/bed	100.0	73.6	22.9	2.7	0.8	535
Health Center w/o bed	100.0	76.3	20.7	2.5	0.5	778
Social Security	100.0	87.7	12.3	0.0	0.0	81
Subcentro de Salud	*	*	*	*	*	22
Puesto de Salud	100.0	64.0	28.9	3.6	3.5	50
Private Hospital or Clinic	100.0	88.1	10.6	1.3	0.0	442
Other	100.0	76.4	18.2	3.2	2.2	40

\*<25 Cases



TABLE 13-5

Percentage of Currently Married Women Age 15-44 Who Received a Tetanus Injection  
During Their Last Pregnancy, With a Birth in the 5 Years before the Interview  
by Selected Characteristics  
1984 Panama Maternal-Child Health/Family Planning Survey

Characteristics	Total	Residence				Education							
		Urban	Rural		Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University				
Total	58.3 (3,109)	55.0 (1,168)	61.0 (1,941)		54.6 (745)	63.0 (940)	61.5 (877)	54.6 (357)	43.3 (190)				
<u>MCH Services**</u>													
None	5.7 (124)	*	(8)	6.2 (105)	5.2 (93)	*	(23)	*	(8)	*	(0)	*	(0)
Prenatal Only	59.6 (77)	*	(20)	59.5 (57)	58.0 (32)	*	(23)	*	(14)	*	(6)	*	(2)
Postpartum Only	* (6)	*	(3)	* (3)	* (3)	*	(0)	*	(2)	*	(1)	*	(0)
Well Baby Only	12.7 (120)	*	(19)	14.3 (101)	11.4 (65)	16.3 (36)	*	(18)	*	(0)	*	(1)	
Prenatal and Postpartum	66.2 (26)	*	(11)	* (15)	* (7)	*	(10)	*	(6)	*	(3)	*	(0)
Prenatal and Well Baby	56.6 (332)	49.1 (105)	61.1 (227)		65.5 (98)	56.2 (111)	52.8 (80)	43.9 (31)	*	(12)			
Postpartum and Well Baby	8.2 (149)	4.5 (33)	9.6 (116)		10.5 (60)	6.0 (56)	11.0 (25)	*	(4)	*	(4)		
All Three Services	65.2 (2,275)	58.0 (963)	72.3 (1,312)		75.2 (387)	71.4 (681)	66.0 (724)	55.0 (312)	43.2 (171)				

\* < 25 Cases

\*\* Maternal-Child Health Services received for last pregnancy.

TABLE 13-6

Place of Last Birth by Residence: Currently Married Women Age 15-44  
 Who Had a Birth During the 5 Years Before the Interview  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Place of Last Birth</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
<u>Hospital Deliveries</u> <u>and Health Care Centers</u>	<u>88.5</u>	<u>97.9</u>	<u>80.7</u>
Integrated Hospital	33.2	24.1	40.7
Santo Tomas Hospital	23.4	39.0	10.4
Social Security Hospital	12.6	20.4	6.2
Other Hospital	10.0	7.4	12.2
Health Center w/bed	4.4	1.1	7.2
Health Center w/o bed	0.6	0.0	1.1
Social Security	0.3	0.4	0.2
Puesto de Salud	0.2	0.0	0.3
Sub Centro de Salud	0.1	0.0	0.2
Private Hospital/Clinic	3.7	5.5	2.2
<u>Home Deliveries</u>	<u>10.2</u>	<u>1.2</u>	<u>17.6</u>
With Doctor/Nurse	0.1	0.0	0.2
With Midwife	6.2	0.6	10.8
Without Midwife	3.9	0.6	6.6
<u>Other</u>	<u>1.3</u>	<u>0.9</u>	<u>1.7</u>
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(3,110)	(1,168)	(1,942)

TABLE 13-7

Place of Last Birth by Education: Currently Married Women Age 15-44  
 Who Had a Birth During the 5 Years Before the Interview  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Place of Last Birth</u>	<u>Total</u>	<u>Education</u>				
		<u>&lt;Primary Complete</u>	<u>Primary Complete</u>	<u>Some Secondary</u>	<u>Secondary Complete</u>	<u>University</u>
<u>Hospital Deliveries and Health Care Center</u>	<u>88.4</u>	<u>66.1</u>	<u>87.8</u>	<u>97.3</u>	<u>97.9</u>	<u>97.5</u>
Integrated Hospital	33.2	33.4	41.1	31.0	28.5	19.0
Santo Tomas Hospital	23.3	10.1	18.1	35.1	27.1	24.4
Social Security Hospital	12.6	4.4	9.1	14.7	22.8	22.4
Other Hospital	10.0	8.4	10.9	9.2	12.4	9.6
Health Center w/bed	4.4	7.4	5.1	4.2	1.1	0.0
Health Center w/o bed	0.6	0.9	0.8	0.5	0.2	0.0
Social Security	0.3	0.2	0.3	0.4	0.0	0.7
Puesto de Salud	0.2	0.5	0.2	0.1	0.0	0.0
Sub Centro de Salud	0.1	0.1	0.3	0.0	0.0	0.0
Private Hospital/Clinic	3.7	0.7	1.9	2.1	5.8	21.4
<u>Home Deliveries</u>	<u>10.2</u>	<u>30.6</u>	<u>11.1</u>	<u>2.2</u>	<u>1.5</u>	<u>0.0</u>
With Doctor/Nurse	0.1	0.3	0.2	0.0	0.0	0.0
With Midwife	6.2	17.9	6.8	1.8	0.6	0.0
Without Midwife	3.9	12.4	4.1	0.4	0.9	0.0
<u>Other</u>	<u>1.4</u>	<u>3.3</u>	<u>1.1</u>	<u>0.5</u>	<u>0.6</u>	<u>2.5</u>
<u>Total</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
No. of Cases (Unweighted)	(3,111)	(746)	(939)	(879)	(357)	(190)

TABLE 13-8

Type of Last Delivery, Vaginal, or Cesarean, by Selected  
 Characteristics: Currently Married Women Age 15-44 Whose Last Delivery  
 Within 5 Years of the Interview was in a Hospital  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Characteristics</u>	<u>Type of Delivery</u>				<u>Total</u>	<u>No. of Cases (Unweighted)</u>
	<u>Vaginal</u>	<u>Vaginal with Forceps</u>	<u>Cesarean</u>	<u>Other</u>		
Total	81.7	1.9	16.1	0.3	100.0	(2,448)
<u>Residence</u>						
Urban	78.6	2.2	18.8	0.4	100.0	(1,120)
Rural	85.2	1.5	13.2	0.1	100.0	(1,328)
<u>Education</u>						
<Primary Complete	90.1	1.1	8.8	0.0	100.0	(403)
Primary Complete	85.2	1.8	12.6	0.4	100.0	(734)
Some Secondary	82.6	2.6	14.5	0.3	100.0	(782)
Secondary Complete	72.6	1.8	25.4	0.2	100.0	(344)
University	69.3	1.1	29.6	0.0	100.0	(185)
<u>No. of Live Births</u>						
1	78.4	3.7	17.8	0.1	100.0	(595)
2	75.9	1.1	22.4	0.6	100.0	(649)
3	79.9	1.5	18.6	0.0	100.0	(484)
4-5	92.2	1.2	6.4	0.2	100.0	(431)
6+	91.5	1.7	6.8	0.0	100.0	(289)
<u>Age of Mother at Last Birth</u>						
<15	*	*	*	*	*	(10)
15-19	85.4	3.2	10.5	0.9	100.0	(417)
20-24	81.5	1.5	16.8	0.2	100.0	(831)
25-29	78.9	1.2	19.7	0.2	100.0	(635)
30-34	83.9	1.8	14.3	0.0	100.0	(354)
35-39	80.6	3.9	15.5	0.0	100.0	(158)
40-44	81.6	0.0	18.4	0.0	100.0	(42)

\*<25 cases

TABLE 13-9

Type of Problems Encountered During Last Pregnancy, for Those Women  
Who Had Problems and Whose Last Birth Occurred During the  
5 Years Prior to the Interview by Residence  
1984 Panama Maternal-Child Health/Family Planning Survey

A. Percent Who Had the Problem	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
<u>Type of Problem</u>			
Swollen feet	64.0	64.8	63.3
Swollen hands	22.6	25.8	19.9
High Blood Pressure/ Severe Headaches	51.4	52.0	50.8
Bleeding	25.1	26.0	24.3
B. Percent Hospitalized			
During Last Pregnancy with Pregnancy Related Problem	21.2	22.1	20.5
No. of Cases (Unweighted)	(731)	(286)	(445)

TABLE 13-10

Use of Postpartum Care by Residence and Education: Currently Married  
 Women Age 15-44 Who Had A Live Birth Within 5 Years of Date of Interview  
 1984 Panama Maternal-Child Health/Family Planning Survey

Postpartum Care	Total	Residence		Education				
		Urban	Rural	<Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University
Yes	81.3	87.9	75.9	62.8	81.5	86.9	90.6	91.2
No	18.7	12.1	24.1	37.2	18.5	13.1	9.4	8.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(3,104)	(1,163)	(1,941)	(745)	(937)	(875)	(357)	(190)
Months After Delivery When 1st Received Postpartum Care								
<1	69.1	71.1	67.2	67.5	69.7	70.3	68.2	66.8
1	24.8	24.2	25.2	24.0	23.7	23.9	27.4	29.0
2	2.6	1.7	3.6	4.5	2.5	2.4	1.9	2.0
3	1.3	1.2	1.4	0.7	1.4	1.6	1.3	1.3
4	1.6	1.3	1.8	2.1	2.2	1.4	1.2	0.0
Unknown	0.6	0.5	0.8	1.2	0.5	0.4	0.0	0.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(2,460)	(1,011)	(1,449)	(459)	(748)	(758)	(320)	(175)

TABLE 13-11

Use of Well-Baby Care, by Residence and Education: Currently  
Married Women age 15-44 Who Had a Live Birth Within 5 Years  
of Date of Interview

1984 Panama Maternal-Child Health/Family Planning Survey

Well-Baby Care	Total	Residence		Education				
		Urban	Rural	<Primary Complete	Primary Complete	Some Secondary	Secondary Complete	University
Yes	93.8	96.5	91.6	83.4	95.0	96.8	97.5	98.6
No	6.2	3.5	8.4	16.6	5.0	3.2	2.5	1.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(3,103)	(1,163)	(1,940)	(745)	(935)	(878)	(357)	(190)
Source of Well-Baby Care								
Centro de Salud/no bed	35.6	36.2	35.1	34.0	39.2	40.4	29.2	16.9
Centro de Salud/w bed	21.7	13.9	28.6	27.6	26.3	21.1	13.6	6.6
Hospital Seguro Social	16.6	25.0	9.3	7.1	12.3	18.2	28.9	26.5
Hospital Integrado	11.5	6.0	16.3	19.5	14.4	8.3	7.1	5.4
Private Hospital/Clinic	9.0	14.7	4.1	2.1	3.0	7.7	16.9	38.2
Puesto de Salud	1.6	0.2	2.9	5.8	1.3	0.8	0.0	0.0
Subcentro de Salud	0.8	0.1	1.5	1.4	1.6	0.4	0.0	0.0
Hospital del Niño	0.5	0.7	0.3	0.9	0.5	0.5	0.5	0.0
Midwife	0.1	0.1	0.0	0.0	0.0	0.2	0.0	0.0
Other	2.2	2.8	1.7	1.0	1.4	2.4	2.9	5.8
Unknown	0.4	0.3	0.2	0.6	0.0	0.0	0.9	0.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(2,882)	(1,121)	(1,761)	(590)	(874)	(846)	(344)	(188)
Infant's Age at Well-Baby Care								
<1 month	84.2	87.7	81.2	75.1	85.0	89.2	86.3	89.3
1 month	11.9	10.0	13.5	17.2	12.0	9.6	12.4	9.9
2 month	1.6	1.1	2.1	5.0	0.8	0.6	1.3	0.7
3 month	0.6	0.2	0.9	1.7	0.6	0.4	0.0	0.0
4-5 months	1.3	0.7	1.7	0.7	1.0	0.2	0.0	0.0
Unknown	0.4	0.3	0.6	0.3	0.6	0.0	0.0	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(2,882)	(1,121)	(1,761)	(612)	(884)	(851)	(347)	(188)

TABLE 13-12

Use of Maternal-Child Health Services, by Type of Services Used at  
Time of Last Pregnancy, Residence and Education: Currently Married  
Women Age 15-44 Who Delivered Within 5 Years of Interview  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>MCH Services</u>	<u>Total</u>	<u>Residence</u>		<u>Education</u>				
		<u>Urban</u>	<u>Rural</u>	<u>&lt;Primary Complete</u>	<u>Primary Complete</u>	<u>Some Secondary</u>	<u>Secondary Complete</u>	<u>University</u>
None	2.9	0.6	4.8	11.4	1.5	0.6	0.0	0.0
Prenatal Only	2.4	1.9	2.8	4.3	2.5	1.7	1.4	1.4
Postpartum Only	0.2	0.2	0.1	0.2	0.0	0.3	0.2	0.0
Well-baby Only	3.3	1.3	5.0	8.4	3.5	1.8	0.0	0.7
Prenatal and Postpartum	0.8	0.8	0.7	0.7	1.0	0.7	0.9	0.0
Prenatal and Well-Baby	10.0	8.4	11.4	13.0	10.9	8.9	8.0	6.8
Postpartum and Well-Baby	4.2	2.6	5.6	7.5	5.4	3.0	1.1	1.7
All Three Services	76.2	84.2	69.6	54.5	75.2	83.0	88.4	89.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(3,099)	(1,162)	(1,937)	(742)	(935)	(875)	(357)	(190)



TABLE 13-13

Use of Maternal-Child Health Services, by Type of Services  
 Used at Time of Last Pregnancy and Current Contraceptive Use Status:  
 Currently Married Women Age 15-44 Who Delivered Within 5 Years of Interview  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>MCH Services</u>	<u>Total</u>	<u>Current User</u>	<u>Not Using</u>
None	2.9	0.6	5.6
Prenatal Only	2.4	0.8	4.3
Postpartum Only	0.2	0.1	0.3
Well-Baby Only	3.3	1.2	5.8
Prenatal & Postpartum	0.8	0.6	0.9
Prenatal & Well Baby	10.0	8.0	12.6
Postpartum & Well Baby	4.2	2.7	6.2
All Three Services	76.2	86.0	64.3
Total	100.0	100.0	100.0
No. of Cases (Unweighted)	(3,099)	(1,625)	(1,474)

TABLE 13-14

Percentage of Currently Married Women Age 15-44 Who Had a Live Birth  
Within 5 Years of Interview Who Are Currently Using Contraception,  
by Maternal and Child Health Services at Time of Last Delivery and Residence  
1984 Panama Maternal-Child Health/Family Planning Survey

Use of MCH Services	Total		Residence			
			Urban		Rural	
Total	54.8	(3,099)	64.5	(1,162)	46.8	(1,937)
<u>Prenatal</u>						
Yes	58.5	(2,719)	65.8	(1,104)	51.6	(1,615)
No	23.8	(389)	37.6	(64)	20.2	(325)
<u>Post-Partum</u>						
Yes	60.1	(2,459)	67.9	(1,011)	52.6	(1,448)
No	31.3	(645)	39.2	(152)	28.1	(493)
<u>Well-Baby</u>						
Yes	57.2	(2,880)	65.9	(1,121)	49.6	(1,759)
No	18.6	(223)	26.9	(42)	15.8	(181)
<u>MCH Combination</u>						
None	12.6	(113)	*	(8)	12.0	(105)
Prenatal Only	18.6	(77)	*	(20)	18.0	(57)
Postpartum Only	*	(6)	*	(3)	*	(3)
Well-Baby Only	20.2	(120)	*	(19)	19.0	(101)
Prenatal & Postpartum	42.5	(26)	*	(11)	*	(15)
Prenatal & Well-Baby	43.4	(332)	46.9	(105)	41.2	(227)
Postpartum & Well-Baby	34.5	(149)	49.6	(33)	28.7	(116)
All Three Services	61.8	(2,276)	68.8	(963)	54.8	(1,313)

\* < 25 Cases

TABLE 13-15

Percent of Children Less Than 6 Years of Age With Diarrhea During  
the Week Prior to Interview, by Selected Characteristics  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Selected Characteristics</u>	<u>Percent</u>	<u>No. of Cases (Unweighted)</u>
Total	9.8	(4,972)
<u>Residence</u>		
Urban	8.6	(1,776)
Rural	10.8	(3,196)
<u>Age of Child</u>		
<1	14.1	(1,078)
1	14.1	(1,009)
2	9.5	(1,008)
3	5.0	(967)
4	5.5	(838)
5	8.2	(67)
<u>Source of Drinking Water</u>		
River, Stream	18.5	(217)
Sanitary Public Well	15.2	(172)
Lined Well	12.0	(232)
Well	11.7	(197)
Public Pipe/Formation	11.0	(1,041)
Piped Into House	8.6	(2,958)
Rain Water	*	(13)
Other	6.9	(138)
Unknown	*	(4)
<u>Electrification</u>		
Yes	8.9	(3,154)
No	11.8	(1,818)
<u>Sanitary Services</u>		
Common Latrine	15.1	(285)
None	13.7	(345)
Common, Sewage System	10.3	(226)
Private with Sewage System	9.0	(973)
Private Latrine	8.7	(2,503)
Private, Septic Tank	7.9	(308)
Common, Septic Tank	7.8	(34)
Other	18.9	(296)
Unknown	*	(2)

\*<25 Cases

TABLE 13-16

Type of Treatment Given to Children With Recent Diarrhea, by Residence  
 1984 Panama Maternal-Child Health/Family Planning Survey  
 (Percent Distribution)

<u>Type of Treatment</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
Otra medicina	42.5	40.8	43.5
Ninguno	14.1	11.0	15.9
Medicina tradicional	7.5	5.6	8.7
Paquetes de sales de hidratacion oral	4.3	4.7	4.0
Suero Casero	0.7	1.4	0.3
Tratamiento endovenoso	0.6	0.8	0.5
Other	15.1	20.7	11.7
Unknown	15.2	15.0	15.4
Total	100.0	100.0	100.0
No. of Cases (Unweighted	(538)	(169)	(369)

TABLE 14-1

Percentage of Children Less Than 5 Years of Age Receiving Polio,  
DPT, and Measles Immunization by Residence and Number of Doses  
1984 Panama Maternal-Child Health/Family Planning Survey

A.	<u>No. Doses Polio</u>	<u>Total</u>	<u>Residence</u>	
			<u>Urban</u>	<u>Rural</u>
	None	7.0	6.2	7.7
	1	8.6	8.0	9.1
	2	8.8	8.2	9.3
	3	25.4	26.7	24.3
	Booster	39.6	41.0	38.6
	Unknown	<u>10.6</u>	<u>9.9</u>	<u>11.0</u>
	Total	100.0	100.0	100.0
	No. of Cases (Unweighted)	(4,854)	(1,745)	(3,109)
B.	<u>No. Doses DPT</u>	<u>Total</u>	<u>Residence</u>	
			<u>Urban</u>	<u>Rural</u>
	None	7.9	7.1	8.5
	1	7.9	7.1	8.4
	2	8.4	7.6	9.0
	3	26.0	27.4	24.9
	Booster	39.0	40.6	37.8
	Unknown	<u>10.8</u>	<u>10.2</u>	<u>11.4</u>
	Total	100.0	100.0	100.0
	No. of Cases (Unweighted)	(4,838)	(1,739)	(3,099)
C.	<u>No. of Doses Measles</u>	<u>Total</u>	<u>Residence</u>	
			<u>Urban</u>	<u>Rural</u>
	None	21.4	20.9	21.9
	1	25.6	25.2	26.0
	2	41.0	42.4	39.9
	Unknown	<u>12.0</u>	<u>11.5</u>	<u>12.2</u>
	Total	100.0	100.0	100.0
	No. of Cases (Unweighted)	(4,820)	(1,732)	(3,088)

TABLE 14-2

Percentage of Children Less Than 5 Years of Age With Complete\*  
 Polio, DPT, and Measles Immunization by Residence  
 1984 Panama Maternal-Child Health/Family Planning Survey

<u>Immunization</u>	<u>Total</u>	<u>Residence</u>	
		<u>Urban</u>	<u>Rural</u>
Polio	65.0	67.7	63.0
DPT	65.0	68.0	62.7
Measles	66.6	67.6	65.8
No. of Cases (Unweighted)	(4,851)	(1,745)	(3,106)

\*Complete Immunization for Polio and DPT = 3+ doses;  
 Measles = 1+ dose

TABLE 14-3

Percentage of Children Less Than 5 Years of Age With Reported  
Complete\* Polio, DPT and Measles Immunization, by Age of Child  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Immunization</u>	<u>Total</u>	<u>Age of Child</u>				
		<u>&lt;1</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
Polio	65.0	28.2	70.9	76.7	77.5	76.1
DPT	65.0	28.7	70.9	77.2	77.2	75.2
Measles	66.6	24.0	78.6	78.7	78.3	77.4
No. of Cases (Unweighted)	(4,851)	(1,063)	(1,001)	(995)	(962)	(830)

\*Complete Immunization for Polio and DPT = 3+ doses;  
Measles = 1+ dose

TABLE 14-4

Percentage of Children Less Than 5 Years of Age Receiving Polio, DPT,  
and Measles Immunization, by Residence, Age of Child and Number of Doses  
1984 Panama Maternal-Child Health/Family Planning Survey

Residence and Age of Child	Total	Number of Doses of Polio Vaccine						Complete Immunization*
		0	1	2	3	Booster	Unknown	
<u>Total</u>	100.0	7.0	8.6	8.8	25.4	39.6	10.5	65.0
<1	100.0	22.7	26.5	17.8	26.5	1.7	4.8	28.2
1	100.0	3.1	6.4	10.3	50.0	20.9	9.2	70.9
2-4	100.0	2.5	2.7	5.0	16.1	60.6	13.0	76.8
 <u>Urban</u>	 100.0	 6.2	 8.0	 8.2	 26.7	 41.0	 9.9	 67.7
<1	100.0	20.7	26.4	17.0	30.2	1.1	4.6	31.3
1	100.0	2.7	4.6	9.2	53.6	21.5	8.4	75.1
2-4	100.0	2.0	2.3	4.7	16.2	62.7	12.1	78.9
 <u>Rural</u>	 100.0	 7.7	 9.1	 9.3	 24.3	 38.6	 11.0	 62.9
<1	100.0	24.4	26.6	18.4	23.6	2.2	4.8	25.8
1	100.0	3.5	7.8	11.1	47.4	20.4	9.8	67.8
2-4	100.0	2.9	3.0	5.2	16.1	58.9	13.9	75.0
	Total	Number of Doses of DPT Vaccine						Complete Immunization*
		0	1	2	3	Booster	Unknown	
<u>Total</u>	100.0	7.9	7.9	8.4	26.0	39.0	10.8	65.0
<1	100.0	25.6	23.6	17.2	27.0	1.7	4.9	28.7
1	100.0	3.3	6.4	10.2	50.9	20.0	9.3	70.9
2-4	100.0	2.9	2.5	4.4	16.7	59.8	13.6	76.6
 <u>Urban</u>	 100.0	 7.1	 7.1	 7.6	 27.4	 40.6	 10.2	 68.0
<1	100.0	23.0	24.1	15.7	30.9	1.3	5.0	32.2
1	100.0	2.7	4.2	8.2	55.2	21.3	8.4	76.5
2-4	100.0	2.7	1.8	4.4	16.6	62.0	12.5	78.6
 <u>Rural</u>	 100.0	 8.5	 8.4	 9.0	 24.9	 37.8	 11.4	 62.7
<1	100.0	27.6	23.2	18.4	24.0	2.0	4.8	26.0
1	100.0	3.7	8.0	11.5	47.8	19.1	9.9	66.9
2-4	100.0	3.1	3.0	4.5	16.8	58.2	14.4	75.0



TABLE 14-4 Continued

Residence and Age of Child	Total	Number of Doses of Measles Vaccine				Complete Immunization**
		0	1	Booster	Unknown	
<u>Total</u>	<u>100.0</u>	<u>21.4</u>	<u>25.6</u>	<u>41.0</u>	<u>11.9</u>	<u>66.6</u>
<1	100.0	70.7	21.2	2.9	5.2	24.0
1	100.0	11.3	42.1	36.6	10.1	78.6
2-4	100.0	6.7	21.5	56.7	15.1	78.2
<u>Urban</u>	<u>100.0</u>	<u>20.9</u>	<u>25.2</u>	<u>42.4</u>	<u>11.5</u>	<u>67.6</u>
<1	100.0	69.1	21.7	3.6	5.6	25.3
1	100.0	9.3	38.7	42.9	9.1	81.6
2-4	100.0	6.9	21.9	56.7	14.5	78.6
<u>Rural</u>	<u>100.0</u>	<u>21.9</u>	<u>26.0</u>	<u>39.9</u>	<u>12.2</u>	<u>65.9</u>
<1	100.0	72.0	20.7	2.3	5.0	23.0
1	100.0	12.8	44.5	31.9	10.8	76.4
2-4	100.0	6.5	21.1	56.7	15.7	77.8

\*Three or more doses

\*\*One or more doses

TABLE 14-5

Percentage of Children Less Than 5 Years of Age With Reported Complete  
Polio, DPT and Measles Immunization: Panama, Honduras, and Guatemala

<u>Immunization</u>	<u>Panama</u>		<u>Honduras</u>	<u>Guatemala</u>
	<u>(1979)*</u>	<u>(1984)</u>	<u>(1981)</u>	<u>(1983)</u>
Polio	54.8	65.0	34.7	33.4
DPT	53.4	65.0	33.4	32.9
Measles	58.4	66.6	50.7	52.9
No. of Cases (Unweighted)	(2,399)	(4,851)	(1,953)	(4,190)

\*Panama 1979 children less than 6 years of age.

TABLE 15-1

Population Profile by Health Region: Women Age 15-44  
 1984 Panama Maternal-Child Health/Family Planning Survey  
 (Percent Distribution)

Characteristic	Health Region												
	Total	Bocas del Toro	Cocle	Colon	Chiriqui	Darien	Herrera	Los Santos	Panama Oeste	Panama Met.	Panama Este	Veraguas	San Blas
<u>Residence</u>													
Urban	52.6	36.8	24.6	50.8	35.5	5.4	39.5	10.6	51.8	89.6	17.5	14.7	0.0
Rural	47.4	63.2	75.4	49.2	64.5	94.6	60.5	89.4	48.2	10.4	82.5	85.3	100.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<u>Ethnicity</u>													
Indian	5.8	36.4	4.6	2.4	9.8	26.5	2.1	1.0	2.1	1.7	2.6	4.2	77.2
Non-Indian	94.2	63.6	95.4	97.6	90.2	73.5	97.9	99.0	97.9	98.3	97.4	95.8	22.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<u>Education</u>													
<Primary Complete	16.6	31.3	22.8	7.8	23.8	48.3	18.9	18.4	14.7	7.0	27.4	28.9	51.5
Primary Complete	26.9	28.3	40.2	26.4	27.3	25.5	40.3	47.6	25.0	17.6	40.2	32.4	18.7
Some Secondary	33.5	29.2	22.9	39.5	29.9	20.8	28.5	20.9	38.6	41.7	22.2	22.9	26.3
Secondary Complete	14.1	10.4	10.6	16.5	11.2	4.4	7.9	7.6	12.5	19.7	9.4	10.9	2.3
University	8.9	0.8	3.5	9.8	7.8	1.0	4.4	5.5	9.2	14.0	0.8	4.9	1.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(7,588)	(579)	(602)	(539)	(1,156)	(294)	(428)	(397)	(679)	(1,841)	(234)	(668)	(171)

TABLE 15-2

Mean Number of Children Ever Born per Ever-Married Woman  
15-44 Years by Age and Health Region  
1984 Panama Maternal-Child Health/Family Planning Survey

Health Region	Total	Age					
		15-19	20-24	25-29	30-34	35-39	40-44
Bocas del Toro	3.7	1.1	2.2	3.7	5.0	6.4	7.4
Cocle	3.6	1.0	2.0	3.1	4.2	4.8	6.1
Colon	3.4	*	1.9	2.8	3.7	5.0	5.4
Chiriqui	3.4	0.9	1.8	2.7	3.6	4.7	6.0
Darien	4.1	1.2	2.7	3.5	4.4	6.0	7.4
Herrera	2.9	*	1.6	2.4	2.8	4.3	4.7
Los Santos	2.8	*	1.5	2.3	2.8	3.6	4.4
Panama Oeste	3.0	0.8	1.4	2.5	3.5	4.2	5.3
Panama Metro.	2.7	0.8	1.5	2.3	2.8	3.8	4.2
Panama Este	3.4	*	1.9	2.7	3.4	4.8	5.4
Veraguas	3.6	1.1	1.8	3.0	4.2	4.6	6.4
San Blas	3.3	*	*	2.9	3.6	4.5	*
Total	3.1	0.9	1.7	2.6	3.4	4.4	5.2

\* < 25 Cases

Health Region	Total	Number of Cases (Unweighted)					
		15-19	20-24	25-29	30-34	35-39	40-44
Bocas del Toro	488	77	134	113	65	61	38
Cocle	455	33	96	101	81	78	66
Colon	424	22	91	98	82	74	57
Chiriqui	862	68	181	181	167	138	127
Darien	270	39	45	55	51	45	35
Herrera	329	17	74	69	59	52	58
Los Santos	304	23	50	60	54	49	68
Panama Oeste	491	40	77	118	105	92	59
Panama Metro.	1,260	69	254	304	245	220	168
Panama Este	204	14	36	58	27	37	32
Veraguas	523	36	105	104	114	97	67
San Blas	146	19	22	31	29	25	20

TABLE 15-3

Estimates of Fertility Rates for the 12-Months Prior to  
Date of Interview by Health Region  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Health Region</u>	<u>TFR 15-44</u>	<u>GFR 15-44</u>	<u>CBR</u>	<u>95% Confidence Interval CBR</u>
Bocas del Toro	6.5	238	45	38-52
Cocle	5.0	184	37	31-43
Colon	5.0	188	40	33-47
Chiriqui	3.9	142	31	27-35
Darien	7.0	249	47	38-56
Herrera	3.7	134	30	23-37
Los Santos	2.9	100	22	16-28
Panama Oeste	3.8	140	30	24-36
Panama Metro	3.2	120	31	27-35
Panama Este	4.5	155	29	20-38
Veraguas	5.7	206	40	34-46
San Blas	6.0	204	44	31-57
Total	4.0	146	33	31-35

TABLE 15-4

Percentage of Women Age 15-44 Who Ever Breastfed Their Last Live  
Birth and Mean Duration Breastfed\* by Health Region  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Health Region</u>	<u>Percent Ever Breastfed</u>	<u>Mean Duration Breastfeeding (months)</u>	<u>No. of Cases (Unweighted)</u>
Bocas del Toro	96.2	14.9	(236)
Cocle	96.4	12.4	(197)
Colon	92.7	10.0	(164)
Chiriqui	94.1	12.9	(288)
Darien	95.5	14.0	(112)
Herrera	91.1	9.0	(101)
Los Santos	79.8	4.8	(79)
Panama Oeste	90.7	9.1	(151)
Panama Metro.	94.0	8.9	(384)
Panama Este	91.7	9.6	(60)
Veraguas	98.2	15.2	(220)
San Blas	94.7	18.1	(57)

Estimated by using 1-24 month prevalence/incidence method

TABLE 15-5

Currently Married Women Age 15-44 Currently  
Using Contraception by Health Region and Method  
1984 Panama Maternal-Child Health/Family Planning Survey

Current Use and Method	Total	Health Region											San Blas
		Bocas Del Toro	Cocle	Colon	Chiriqui	Darren	Herrera	Los Santos	Panama Oeste	Panama Met.	Panama Este	Veraguas	
Currently Using	58.8	47.6	46.9	58.2	55.7	50.1	65.0	73.7	60.7	63.7	70.1	47.1	19.7
Female Sterilization	33.1	16.1	29.0	28.8	32.8	31.6	43.0	48.6	37.0	32.6	45.6	28.8	8.3
Male Sterilization	0.4	0.0	0.2	0.5	0.3	0.0	0.0	0.0	0.2	0.6	0.5	0.0	1.5
Orals	12.2	12.1	8.8	13.8	7.2	11.3	13.4	21.1	10.7	14.2	14.7	7.3	6.8
IUD	5.8	6.2	2.0	6.6	4.1	1.2	3.8	1.4	7.4	8.6	4.7	5.6	0.0
Condom	1.6	3.1	2.2	2.1	2.3	0.0	1.9	0.4	2.1	1.3	0.5	0.9	0.8
Injection	0.7	0.7	1.2	1.1	0.4	2.0	1.0	0.0	0.7	0.9	0.5	0.4	0.0
Foam	1.1	0.4	0.5	2.4	1.5	0.0	0.6	0.4	0.7	1.6	1.0	0.2	0.0
Diaphragm	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0
Rhythm	2.3	2.6	2.0	1.3	4.4	1.6	1.0	1.1	1.2	2.3	2.1	2.6	1.5
Withdrawal	1.4	5.7	1.0	1.3	2.7	2.0	0.3	0.7	0.5	1.2	0.5	1.3	0.0
Other	0.2	0.7	0.0	0.3	0.0	0.4	0.0	0.0	0.0	0.4	0.0	0.0	0.8
Not Currently Using	41.2	52.4	53.1	41.8	44.3	49.9	35.0	26.3	39.3	36.3	29.9	52.9	80.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(5,221)	(454)	(411)	(378)	(780)	(256)	(314)	(284)	(430)	(1,124)	(191)	(466)	(133)

TABLE 15-6

Reasons for Not Currently Using Contraception (Percent Distribution) by  
Health Region, Currently Married Women Age 15-44  
1984 Panama Maternal-Child Health/Family Planning Survey

Reason for Nonuse	Total	Health Region											San Blas
		Bocas del Toro	Cocle	Colon	Chiriqui	Darien	Herrera	Los Santos	Panama Oeste	Panama Metro	Panama Este	Veraguas	
<u>Reasons Related to Pregnancy</u>													
<u>Fecundity &amp; Sexual Activity</u>	66.8	59.9	65.2	65.7	61.2	64.6	64.2	76.7	69.5	70.8	67.9	67.1	52.0
Currently Pregnant	21.8	27.1	20.5	19.4	20.9	20.5	23.8	21.8	23.8	24.1	17.9	17.8	13.5
Postpartum, Breastfeeding	15.6	14.0	18.1	18.7	17.2	21.3	14.7	15.1	12.5	11.2	16.1	24.9	9.6
Infrequent Sexual Relations	10.3	3.9	15.4	4.5	7.3	10.2	5.5	9.6	13.8	12.9	8.9	9.1	10.6
Subfecund/Infertile	9.8	5.7	7.0	16.1	7.6	7.9	9.2	9.6	8.8	10.7	16.1	11.2	10.6
Desires Pregnancy	8.8	9.2	4.2	6.4	7.0	3.9	11.0	20.6	10.6	11.7	7.1	3.3	5.8
Menopause	0.5	0.0	0.0	0.6	1.2	0.8	0.0	0.0	0.0	0.2	1.8	0.8	1.9
<u>Other Reasons</u>	32.4	36.2	34.4	34.2	38.3	33.1	35.8	23.3	30.0	28.5	32.1	32.4	38.5
Fear Side Effects	11.2	19.6	14.9	11.0	16.0	9.4	10.1	5.5	8.1	7.9	12.5	9.1	21.2
Does Not Like/Want	5.1	3.5	4.6	5.8	5.2	6.3	6.4	4.1	0.6	6.0	7.1	5.0	6.7
Medical Reasons	3.3	2.2	1.9	3.2	4.6	1.6	0.0	2.7	3.8	4.2	3.6	2.1	2.9
Husband Doesn't Permit	0.9	0.0	2.3	0.0	0.3	0.8	2.8	0.0	3.1	0.2	1.8	1.7	1.0
Other	11.9	10.9	10.7	14.2	12.2	15.0	16.5	11.0	14.4	10.2	7.1	14.5	6.7
<u>Unknown</u>	0.8	3.9	0.4	0.1	0.5	2.3	0.0	0.0	0.5	0.7	0.0	0.5	9.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(2,216)	(229)	(215)	(155)	(344)	(127)	(109)	(73)	(160)	(403)	(56)	(241)	(104)



TABLE 15-7

Percentage of Women Age 15-44 Who Are In Need of Family Planning Services\*\*,  
by Health Region and Residence  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Health Region</u>	<u>Total</u>		<u>Urban</u>		<u>Rural</u>	
Bocas del Toro	20.2	(579)	13.6	(213)	24.0	(366)
Cocle	17.9	(602)	7.4	(148)	21.4	(454)
Colon	18.0	(539)	14.6	(274)	21.5	(265)
Chiriqui	15.3	(1,156)	10.5	(410)	18.0	(746)
Darien	22.1	(294)	*	(16)	23.4	(278)
Herrera	11.2	(428)	7.7	(169)	13.5	(259)
Los Santos	8.3	(397)	4.8	(42)	8.7	(355)
Panama Oeste	9.1	(679)	8.0	(352)	10.4	(327)
Panama Metro	9.0	(1,841)	8.2	(1,649)	16.2	(192)
Panama Este	9.0	(234)	2.4	(41)	10.4	(193)
Veraguas	18.6	(668)	8.2	(98)	20.4	(570)
San Blas	30.4	(171)	*	(0)	30.4	(171)
Total	12.8	(7,588)	8.8	(3,412)	17.2	(4,176)

\* < 25 Cases

\*\* In need of family planning services is defined as women who want no more children and who are not currently pregnant and not currently desiring pregnancy, who are not using any contraceptive method for reasons not related to pregnancy, subfecundity, or sexual activity.

TABLE 15-8

Use of Maternal-Child Health Services by Type of Services Used at  
Last Pregnancy and Health Region: Currently Married Women Age 15-44 Who  
Delivered Within 5 Years of Interview  
1984 Panama Maternal-Child Health/Family Planning Survey

MCH Services	Health Region												
	Total	Bocas del Toro	Cocle	Colon	Chiriqui	Darien	Herrera	Los Santos	Panama Oeste	Panama Metro	Panama Este	Veraguas	San Blas
None	2.8	8.9	4.1	0.4	9.0	7.4	2.5	1.5	0.4	0.5	0.9	1.0	5.0
Prenatal Only	2.4	3.5	2.6	1.2	2.8	2.8	1.2	3.8	1.3	2.0	3.8	3.4	2.5
Postpartum Only	0.2	0.0	0.4	0.4	0.0	1.1	0.0	0.0	0.0	0.2	0.0	0.0	1.2
Well-Baby Only	3.3	6.6	7.5	1.6	6.4	4.6	0.0	0.8	2.2	1.1	0.9	5.4	8.8
Prenatal and Postpartum	0.7	0.6	0.4	0.4	1.7	2.3	1.2	0.0	0.0	0.6	1.9	0.0	2.5
Prenatal and Well-Baby	10.1	10.1	14.3	12.2	9.2	17.0	10.6	8.3	10.3	6.8	11.3	15.8	7.5
Postpartum and Well-Baby	4.2	11.4	6.0	3.9	5.2	5.1	3.1	3.0	2.6	2.9	2.8	4.4	6.2
All Three	76.3	58.9	64.7	79.9	65.7	59.7	81.4	82.7	83.2	85.8	78.3	70.1	66.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Cases (Unweighted)	(3,101)	(316)	(266)	(254)	(466)	(176)	(161)	(133)	(232)	(613)	(106)	(298)	(80)

TABLE 15-9

Percentage of Children Less Than 5 Years of Age With Reported  
Complete\* Polio, DPT, and Measles Immunization by Health Region  
1984 Panama Maternal-Child Health/Family Planning Survey

<u>Health Region</u>	<u>Polio</u>	<u>DPT</u>	<u>Measles</u>	<u>No. of Cases (Unweighted)</u>
Bocas del Toro	48.5	49.4	63.6	530
Cocle	67.8	67.2	65.2	453
Colon	58.9	58.4	59.6	397
Chiriqui	65.0	65.8	70.6	701
Darien	58.4	57.6	64.9	284
Herrera	69.2	68.3	65.5	224
Los Santos	64.6	64.0	67.2	175
Panama Oeste	73.5	73.2	74.7	343
Panama Metro.	67.7	67.9	66.2	920
Panama Este	60.4	59.1	64.2	176
Veraguas	65.9	66.0	67.4	534
San Blas	49.1	50.4	59.1	114
Total	65.0	65.0	66.6	4,851

\*Complete Immunization for Polio and DPT = 3+ doses;  
Measles = 1+ dose

MANUAL DE CODIFICACION

ENCUESTA "SOBRE SALUD MATERNO INFANTIL Y  
PLANIFICACION FAMILIAR

AÑO 1985

REPUBLICA DE PANAMA

MINISTERIO DE SALUD/CAJA DEL SEGURO SOCIAL  
MINISTERIO DE PLANIFICACION Y POLITICA ECONOMICA

CUARTO INFORME DE PROGRESO  
AL 31 DE ENERO DE 1985

PROYECTO RED NACIONAL DE SERVICIOS DE SALUD  
( MEJORAMIENTO RED HOSPITALARIA NACIONAL )

PANAMA - 5200

FINANCIADO POR: FONDO DE PRE-INVERSION

BANCO INTERAMERICANO DE DESARROLLO

ORGANIZACION PANAMERICANA DE LA SALUD (Agencia Ejecutora)

A.	VARIABLE PROVINCIA	REGION DE SALUD	CODIGO	CASILLA 1-2
	Bocas del Toro <u>1/</u>	Bocas del Toro	01	
	Coclé <u>2/</u>	Coclé	02	
	Colón <u>3/</u>	Colón	03	
	Chiriquí <u>4/</u>	Chiriquí	04	
	Darién <u>5/</u>	Darién	05	
	Herrera <u>6/</u>	Herrera	06	
	Los Santos <u>7/</u>	Los Santos	07	
	Panamá <u>8/</u>	Panamá Oeste	08	
	Panamá <u>8/</u>	Pmá Metropolitana	09	
	Panamá <u>8/</u>	Panamá Este	10	
	Veraguas <u>9/</u>	Veraguas	11	
	Comarca de San Blas <u>3/</u>	San Blas	12	

B. VARIABLE DISTRITO

3-4

REGION DE SALUD  
BOCAS DEL TORO

Bocas del Toro	00
Changuinola	01
Chiriquí Grande	02

REGION DE SALUD  
COCLE

Aguadulce	00
Antón	01
La Pintada	02
Natá	03
Olá	04
Penonomé	05

## CODIGO CASILLA

REGION DE SALUD  
DE COLON

Colón	00
Chagres	01
Donoso	02
Portobelo	03
Santa Isabel	04

REGION DE SALUD  
DE CHIRIQUI

Alanje	00
Barú	01
Boquerón	02
Boquete	03
Bugaba	04
David	05
Dolega	06
Gualaca	07
Remedio	08
Renacimiento	09
San Félix	10
San Lorenzo	11
Tolá	12

REGION DE SALUD  
DE DARIEN

Chepigana	00
Pinogana	01

REGION DE SALUD  
DE HERRERA

Chitró	00
Las Minas	01
Los Pozos	02
Océ	03
Parita	04
Pesé	05
Santa María	06

## CODIGO CASILLA

REGION DE SALUD  
DE LOS SANTOS

Guararé	00
Las Tablas	01
Los Santos	02
Macaracas	03
Pedasi	04
Pacri	05
Tonosi	06

REGION DE SALUD  
DE VERAGUAS

Atalaya	00
Calobre	01
Cañazas	02
La Meza	03
La Palma	04
Montijo	05
Rio de Jesús	06
San Francisco	07
Santa Fé	08
Santiago	09
Soná	10

REGION DE SALUD  
DE SAN BLAS

Ailigandí (35-01)	05
Narganá (35-02)	06
Puerto Obaldía (35-03)	07
Tubualá (35-04)	08

NOTA: Para efecto de la labor que lleve a cabo el sector salud, la provincia de Panamá, ha sido estructurada en tres regiones de salud: Panamá Este, Panamá Metropolitana. y Panamá Oeste.



## CASILLA

La Región Panamá Este, la integran los distritos de Balboa, Chepo, Chimán y los corregimientos de Pacora y San Martín del distrito de Panamá.

La Región Panamá Oeste, la integran los distritos de Capira, Chame, La Chorrera, San Carlos y Arraiján (exceptuando el corregimiento de Veracruz).

La Región Metropolitana, la integran los distritos de Panamá (excluyendo los corregimientos de Pacora y San Martín), San Miguelito, Taboga y el corregimiento de Veracruz de Arraiján).

Para asignar la codificación correspondiente a las regiones y distritos de salud de la provincia de Panamá, se utilizarán los siguientes códigos.

---

B VARIABLE DISTRITO (Continuación)

REGION DE SALUD  
PANAMA OESTE

Distrito de Arraiján (80-01, 80-02, 80-03, 80-04, 80-06)	00
Distrito de Capira	03
Distrito de Chame	04
Distrito La Chorrera	07
Distrito San Carlos	27

REGION DE SALUD  
PANAMA METROPOLITANA

Corregimiento Veracruz (Arraiján 80-05)	01
Distrito de Panamá (Corregimientos)	

CASILLA

San Felipe (87-01)	08
El Chorrillo (87-02)	09
Santa Ana (87-03)	10
La Exposición o Calidonia (87-04)	11
Curundú (87-05)	12
Betania (87-06)	13
Bella Vista (87-07)	14
Pueblo Nuevo (87-08)	15
San Francisco (87-09)	16
Parque Lefevre (87-10)	17
Río Abajo (87-11)	18
Juan Díaz (87-12)	19
Pedregal (87-13)	20
Ancón (87-14)	21
Chilibre (87-15)	22
Las Cumbres (87-16)	23
Tocumen (87-19)	26

DISTRITO DE SAN MIGUELITO  
(Corregimiento)

Amelia D. De Icaza (89-01)	28
Belisario Porras (89-02)	29
José D. Espinar (89-03)	30
Mateo Iturralde (89-04)	31
Victoriano Lorenzo (89-05)	32

Distrito de Taboga 33

REGION DE SALUD PANAMA ESTE

Distrito de Balboa	02
Distrito Chepo	05
Distrito Chimán	06
Distrito de Panamá	
Corregimiento Pacora (87-17)	24
Distrito de Panamá	
Corregimiento San Martín (87-18)	25

PROCEDIMIENTO PARA LA CODIFICACION:

Para codificar la información relacionada con las regiones y distritos de salud, el cuestionario dispone de la siguiente información:

PROVINCIA: \_\_\_\_\_    
 DISTRITO : \_\_\_\_\_    
 SEGMENTO :

Con excepción de la provincia de Panamá, que consta de tres regiones de salud, los datos sobre provincia y distrito, por sí solos permiten la codificación de regiones y distritos de salud.

EJEMPLO 1: Provincia: Veraguas    
 Distrito : Atalaya

EJEMPLO 2: Provincia: Los Santos    
 Distrito : Macaracas

Consultado los códigos de regiones de salud, punta A, variable provincia y los códigos de distrito, punto B, variable distrito, la codificación de los ejemplos anteriores serian:

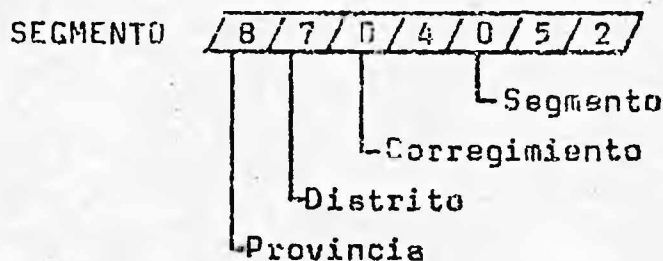
EJEMPLO 1: Provincia: Veraguas  1  1  
 Distrito : Atalaya  0  0  
 EJEMPLO 2: Provincia: Los Santos  0  7  
 Distrito : Macaracas  0  3

En el caso de la provincia de Panamá, se dispone de dos tipos de información para codificar las regiones de salud y los distritos que la integran. El nombre del distrito propiamente dicho y el número del segmento censal.

a. Cada vez que la boleta que usted esta revisando corresponda a los distritos de Balboa, Chepo, Chimán, Capira, Chame, La Chorrera, San Carlos y Taboga, tan sola esta información le facilitará la codificación. Busque en el listado el código que corresponda al distrito, luego asigne el código de la región correspondiente. Ejemplo:

Provincia:	Panamá	08
Distrito :	San Carlos	27
Provincia:	Panamá	08
Distrito :	Capira	03
Provincia:	Panamá	02
Distrito :	Taboga	33

b. En el caso de que la boleta que usted esté revisando corresponda a los distritos de Panamá, Arraiján y San Miguelito, usted deberá utilizar la información de distrito y la numeración del segmento censal, cuya estructura es la siguiente:



El segundo dígito corresponde a distrito.

Los dígitos que ocupan el tercer y cuarto lugar corresponden a corregimientos y los tres últimos dígitos al número del segmento.

Por ello cuando usted encuentre una boleta con la siguiente descripción:

Provincia: Panamá  
 Distrito : Panamá  
 Segmento : 87-18-036

- a. En primer lugar busque en el listado el punto B, variable distrito, el distrito de Panamá y los 4 primeros dígitos del segmento censal (87-18) encerrados entre paréntesis, el cual le permitirá arribar al distrito de Panamá, corregimiento San Martín (87-18)... código de distrito 25 y además la información que especifica que pertenece a la región de salud de Panamá Este.

- b. La Región de Salud Panamá Este, en el listado, punto A., variable provincia tiene el código 10.

Luego la codificación final será:

Provincia: Panamá 10  
 Distrito : Panamá 25  
 Segmento : 87-18-036

El procedimiento de distrito, es similar para los distritos de San Miguelito y Arraiján.

- c. Segmento: Revisar si esta anotado el número de segmento 5-11
- d. Número de vivienda: Revisar si esta anotada 12-13
- e. Número de cuestionario: Habrá momento que este número se repita y esto se debe que hay más de una MEF, en una vivienda, 14-18

CASILLA

estos vendrán amarrados con una liga una vez terminada la codificación deben ser devueltos en la misma forma.

Si al momento de codificar usted descubre dos o más cuestionarios con la misma numeración y en la vivienda en los cuales pertenecen solo hay una MEF o ninguna consultar con la supervisora.

VARIABLE

Lugar poblado:

19

Urbana	1
Rural	2

Se debe transcribir a la casilla 19.

CASILLA

Nº DE PERSONA QUE VIVEN EN LA CASA

26-29

Hombres en la vivienda:

26-27

Ninguno	00
Uno	01
Dos	02
...	
Diez	10
...	
Veinte	20

Mujeres en la vivienda:

28-29

Ninguna	00
Uno	01
Dos	02
...	
Diez	10
...	
Veinte	20

---

8. POR QUE NO VOLVERIA EN BUSCA DE ATENCION  
NUEVAMENTE ?

1. Escasez de cupo para atender.
2. Los doctores llegan muy tarde.
3. Por mala atención.
4. Porque no hay medicinas.
5. Porque se autoreceta.
6. Otro.

---

9. POR QUE PIENSA USTED QUE NO LO ATIENDEN ?

1. Autoreceta.
2. No toman importancia la gravedad  
que no necesita.
3. Otros

14. CUALES SON LOS INGRESOS TOTALES DE LA FAMILIA EN LA ACTIVIDAD ?

43-46

Para transformar:

Quincena a mes se multiplica por 2.16  
Semanal a mes se multiplica por 4.33  
Diario a mes se multiplica por 30 días  
Anual a mes se divide entre 12 meses

En "Otros" puede aparecer:

Trimestral a mes se divide entre 3  
Horas, se multiplica por 8 horas para transformarlo a día y luego se multiplica por 30, para obtenerlo a mes.

Una vez que se obtiene la cantidad total, entonces se codifica en las casillas correspondientes a ingreso familiar (43-46).

Ejemplo:

Salario semanal = B/100.00  
para obtenerlo a mes:

$$B/100.00 \times 4.33 = B/433.00$$

Entonces se codifica, así 0 / 4 / 3 / 3

18. CUAL ES LA EMISORA DE RADIO QUE MAS SE ESCUCHA EN ESTE HOGAR ?

Radio BB.....	01
Radio Balboa.....	02
Radio Cadena Millonaria.....	03
Radio Continente.....	04
Radio 10.....	05
Radio Eco.....	06
Radio Estereo Panamá y sus 2 canales.....	07
Radio Exitosa.....	08
Radio Femenina.....	09
Radio Guadalupe.....	10
Radio Hogar.....	11
Radio Hoxo La Voz del Istmo.....	12
Radio Juvenil.....	13
Radio La Voz del Pueblo.....	14
Radio Libertad.....	15
Radio Mía.....	16



Radio Mil.....	17
Radio Mundial.....	18
Radio Musical.....	19
Radio Provincia.....	20
Radio Revolución.....	21
Radio Tic Tac.....	22
Radio Titania.....	23
Radio TV 2.....	24
Radio Uno Soberana.....	25
Radio Vida.....	26
Radio Atlántico.....	27
Radio Balboa.....	28
Radio Dick.....	29
Radio Hit.....	30
Radio Libertad.....	31
Radio 11.....	32
Radio República.....	33
Radio Stereo Bahía.....	34
Radio Super Sol.....	35
Radio Poderosa.....	36
Radio Sensación.....	37
Radio Nacional Victoriano Lorenzo.....	38
Radio Nacional La Voz del Teribe.....	39
Radio Boquete.....	40
Radio Cristal.....	41
Radio Cultural.....	42
Radio Emisora FM 81.....	43
Radio Chiriquí.....	44
Radio Emisora La Voz del Barú.....	45
Radio Rumbos.....	46
Radio Nacional Guaymie.....	47
Radio Stereo Colosal.....	48
Radio Mi Preferida.....	49
Radio Cristal.....	50
Radio Nacional La Voz de Herrera.....	51
Radio FM.....	52
Radio Reforma.....	53
Radio República...(Antes se tomaba también el 54).....	54
Radio Ritmo.....	55
Ondas del Canajagua.....	56
Radio Nacional Urracá.....	57
Radio Veraguas.....	58
R. P. C.....	59
Radio Exito.....	60
Radio Stereo Omega.....	61
Army Forces Radio.....	62
No tiene preferencia.....	63
Radio Sonora.....	64
Stereo Azul.....	65
C. P. R.....	66
Exitosa Central.....	67
Exitosa Chiriquí.....	68
Radio Lux.....	69

Radio Universal.....	70
Radio Península.....	71
Radio Tropical.....	72
Radio Dimensión.....	73
Radio Belén (Veraguas).....	74
Ondas Chiricanas.....	75
Radio Ondas del Caribe.....	76
Stereo Rey.....	77
Stereo Presidente.....	78
Teletica.....	79
Stereo Color.....	80
X La Panameña.....	81
Radio Colombia.....	82
Stereo Selecta.....	83
Canal 12-60.....	84
Cristóbal Colón.....	85
Voz del Almirante.....	86
Stereo Linda.....	87
A B C Radio La Monumental.....	88
Stereo Caribe.....	89
Stereo 89.....	90
No Tiene Radio.....	98

HORARIO PARA LAS PREGUNTAS 17 y 19

01. 6:00 - 9:00 a.m.
02. 9:00 - 10:00 a.m.
03. 10:00 - 12:00 a.m.
04. 6:00 - 12:00 a.m.
05. 12:00 - 2:00 p.m.
06. 2:00 - 4:00 p.m.
07. 4:00 - 6:00 p.m.
08. 6:00 - 8:00 p.m.
09. 8:00 - 10:00 p.m.
10. Todo el día
11. Toda la mañana
12. Toda la tarde
13. Toda la noche
  
98. Otros
99. No sabe, no responde.

CASILLA

20. PERIODICO QUE MAS SE COMPRA:

55-56

Siglo.....	00
Estrella.....	01
La Prensa.....	02
La República.....	03
Crítica.....	04
Matutino.....	05
Dominical.....	06
Ya.....	07
Quibo.....	08
Otro.....	97
Ninguno.....	98

21. FRECUENCIA CON QUE SE COMPRA ESTE PERIODICO ?

Transcribir ? 57  
códigos an-  
tados.

PAGINA E.

QUE CORRESPONDE A MUJERES DE 15-49 AÑOS  
(MEF), QUE VIVEN EN ESTE HOGAR:

58-59

Ninguna.....	00
Una.....	01
Dos.....	02
...	
Ocho.....	08
...	

EN EL CUADRO DONDE SE ANOTAN LAS MUJERES DE 15-59 AÑOS,  
HAY QUE VERIFICAR LOS DATOS ANOTADOS POR LA ENCUESTADORA  
CON LOS CODIGOS MENCIONADOS ABAJO:

60-75

Ren- glón	Nombre Mujer	Edad	Estado Conyugal	Ultimo grado Aprobado	No. Hijos Nacidos vivos	No. Hijos Actualmen- te vivos	Fecha del ultimo na- cido vivo Mes Año	Resul- tado
* 1	María 01	30 30	Casada 1	P-2 2-2	- 00	- 00	- - 00 00	C 1
* 2	Rosa 02	25 25	4 4	4-3 4-3	3 03	3 03	4 80 04 80	1 1

CASILLA

A usted la información le pueda venir como aparece en los asteriscos y al codificar tiene que tomar en cuenta el número de casillas como el ejemplo, codificado en la segunda línea debajo de cada asterisco.

Nombre de la mujer.....	2	60-61
Edad.....	2	52-63
Estado conyugal.....	1	64
Último grado aprobado.....	2	65-66
No. de hijos nacidos vivos.....	2	67-68
No. de hijos actualmente vivos....	2	69-70
Fecha último hijo nacido vivo:	4	71-74
Mes.....	2	71-72
Año.....	2	73-74

CUESTIONARIO INDIVIDUAL

2. EN QUE MES Y AÑO NACIO USTED ? 76-79

Mes: 76-77

Enero	01
Febrero	02
Marzo	03
Abril	04
Mayo	05
Junio	06
Julio	07
Agosto	08
Septiembre	09
Octubre	10
Noviembre	11
Diciembre	12
No declarado (para mes y año)	99

Año: 78-79

Se anota el año en que nació,  
ejemplo:

Septiembre de 1953 = se co-  
difica 10 / 9 / 5 / 3 /

4. CUAL FUE EL ULTIMO AÑO ESCOLAR QUE USTED APROBO EN LA ESCUELA ?

82-83

- Tomar en cuenta el nivel educativo y el grado o año aprobado anotado por la encuestadora.  
Ejemplo:

2. Primaria 1 2 3 4 5 6

Se codifica 2/3

7. MES Y AÑO DE SU PRIMER CASAMIENTO O UNION ?

86-89

Mes:

87-87

Enero	01
Febrero	02
Marzo	03
Abril	04
Mayo	05
Junio	06
Julio	07
Agosto	08
Septiembre	09
Octubre	10
Noviembre	11
Diciembre	12

No recuerda (para mes y año) 99

Año:

88-89

Se anota el año en que nació.  
ejemplo:

Septiembre de 1953 - se codifica

0/9/5/3

14. CUANDO ESPERA DAR A LUZ ?

96-99

Mes:

Enero	01
Febrero	02
Marzo	03
Abril	04
Mayo	05
Junio	06
Julio	07
Agosto	08
Septiembre	09
Octubre	10
Noviembre	11
Diciembre	12

CASILLA

Año:

98-99

Transcribirlo.

Ejemplo:

Septiembre de 1984 = se codifica

07 97 87 47

15. ESTABA USTED UTILIZANDO ALGUN METODO PARA NO TENER HIJOS CUANDO QUEDO EMBARAZADA POR ULTIMA VEZ ? 100-101

Si contesta No, codifique 00  
Si contesta Si, codifique según los siguientes códigos:

Píldoras, pastillas (gestágenos)	01
Dispositivo intrauterino (DIU)	02
Condón o preservativo	03
Inyección	04
Espumas, jaleas, pastillas vagina- les	05
Diafragma o capuchón vaginal	06
Titmo o abstinencia	07
Retiro o quitarse	08
Esterilización	09
Otros	10
No recuerda el nombre	99

16. CUANTOS EMBARAZOS HA TENIDO USTED ? 102-103

Transcribir el No. de embarazos

Ejemplo:

5 embarazos = 075

10 embarazos = 170

17. HA TENIDO HIJOS NACIDOS MUERTOS ? 104-105

Si es SI, codificar el No. de hijos dados  
ejemplo: 3 = 073

Si es NO, codificar 07 07 00

Si no sabe, codificar 97 97 99

CASILLA

18. CUANTOS HIJOS NACIDOS VIVOS HA TENIDO ?  
(vivos, muertos)

106-107

Codificar el No. de hijos dados.

19. CUANTOS DE ESOS QUE NACIERON VIVOS ESTAN ACTUAL-  
MENTE VIVOS ?

108-111

Hombres

108-109

Ninguno.....	00
Uno.....	01
Dos.....	02
Diez.....	10

Mujeres

110-111

Ninguna.....	00
Una.....	01
Dos.....	02
Diez.....	10

20. EN QUE MES Y AÑO NACIO SU PRIMER HIJO O HIJA ?

112-115

Mes:

112-113

Enero.....	01
Febrero.....	02
Marzo.....	03
Abril.....	04
Mayo.....	05
Junio.....	06
Julio.....	07
Agosto.....	08
Septiembre.....	09
Octubre.....	10
Noviembre.....	11
Diciembre.....	12
No recuerda.....	99

Año:

114-115

Anotar el año dado

Si no recuerda.....	99
---------------------	----



CASILLA

21. CUANDO TUVO USTED EL ULTIMO DE SUS HIJOS QUE NACIO  
VIVO, AUNQUE DESPUES HAYA MUERTO ?

116-119

Mes:

116-117

Enero	01
Febrero	02
Marzo	03
Abril	04
Mayo	05
Junio	06
Julio	07
Agosto	08
Septiembre	09
Octubre	10
Noviembre	11
Diciembre	12
No recuerda	99

24. CUANTOS AÑOS TIENE O TENDRIA ESTE HIJO AHORA ?

123-125

Meses (-2 años)	1	123
Años (2-4 años)	2	123
5 y más)	2	123

Ejemplo: 9 meses: se codifica 1/ 1/ 0/ 9/

2 años : se codifica 1/ 2/ 0/ 2/

Para el total de mes y año, se usa las  
casillas.....

124-125

26 CUANTOS MESES DESPUES LE VINO LA REGLA ?

127-128

Menos de 1 mes	00
1 mes	01
2 meses	02
3 meses	03
...	
10 meses	10
11 meses	11
12 meses	12

Si le dan la información en años,  
transformarla en meses.

CASILLA

28. CUANTAS VECES EN LOS ULTIMAS 24 HOTAS DIO PECHO ?

130-131

No. de veces:

1 vez 01

2 veces 02

9 veces o más 09

Horario establecido

cada hora 11

cada 2 horas 12

cada 5 horas 15

cada 9 horas ó más 19

Todo el día 20

Otro:

No amamantó, madre enferma 30

No amamantó, hijo enfermo 31

29. LE DIO PECHO A SU ULTIMO HIJO NACIDO VIVO ?

Transcribir  
código ano-  
tado.

132

30. POR CUANTOS MESES LE DIO PECHO ?

133-134

Días (todos los días, codificar 00

1 mes..... 01

2 meses..... 02

10 meses..... 10

2 años..... 24

3 años..... 36

Si le dan la información  
en años, transformar a  
meses.

135-158

No le dió pecho..... 98

31. DESDE QUE EDAD EMPEZO A DARLE AL NIÑO  
LA LECHE MATERNA ?

00. Menos de una hora

01. 1 hora

02. 2 horas

03. 3 horas

04. 4 horas

05. 5 horas

06. 6 horas

07. 7 horas

08. 8 horas

09. 9 horas

10. 10 horas

11. 11 horas

12. 12 horas

13. 13 horas

14.

15. etc.

24. 24 horas

25. 1 día

26. 2 días

27. 3 días

28. 4 días

29. 5 días

30. 6 días

31. 7 días

32. 1 semana y más

33. Desde que nace

34. No se le debe dar

35. Desde que me lo dan

97. No le dió pecho

98. Otros

99. No sabe, no responde.

CASILLA

32. CREE USTED QUE SE DEBE DAR PECHO AL  
RECIENTE NACIDO ?

159-161

Si es SI, Transcribir código  
Si es NO, transcribir código

159  
159

Hasta qué edad ?

160-161

1 mes o menos	01
2 meses	02
...	
10 meses	10
...	
24 meses	24

Ejemplo: Contesta SI y 10  
meses, se codifica,  
así:

1  
1 0

No le dió pecho.....	97
Otro.....	98
No sabe, no responde.....	99

Nota: Si contesta sí, anotar en casilla de arriba 1,  
y transcribir código

Si contesta no, anotar en casilla de arriba 2,  
y dejar casillas de abajo en blanco.

32. A. A QUE EDAD CREE USTED QUE DEBERIA EMPEZAR EL NIÑO A TOMAR  
LECHE MATERNA ?

_	Menos de una hora.....	00
-	1 hora.....	01
-	2 horas.....	02
-	3 horas.....	03
-	4 horas.....	04
-	5 horas.....	05
-	6 horas.....	06
-	7 horas.....	07
-	8 horas.....	08
-	9 horas.....	09
-	10 horas.....	10
-	11 horas.....	11
-	12 horas.....	12
-	13 horas.....	13
-	14 horas.....	14
-	15 etc.....	15
-	24 horas.....	24
-	1 día.....	25
-	2 días.....	26
-	3 días.....	27
-	4 días.....	28
-	5 días.....	29
-	6 días.....	30
-	7 días.....	31
-	1 semana y más.....	32
-	Desde que nace.....	33
-	No se le debe dar.....	34
-	A penas se lo den.....	35
-	No sabe, no responde.....	99

CASILLA

102. EN QUE FECHA TUVO EL ULTIMO ABORTO ?

192-195

Mes:..Enero.....	01	192-193
Febrero.....	02	
Marzo.....	03	
Abril.....	04	
Mayo.....	05	
Junio.....	06	
Julio.....	07	
Agosto.....	08	
Septiembre.....	09	
Octubre.....	10	
Noviembre.....	11	
Diciembre.....	12	
No recuerda.....	99	

Año:

Transcribirlo  
No recuerda

99

194-195

Ejemplo:

Septiembre de 1984 = se codifica:

/ 0 / 9 / 8 / 4 /

113. TUVO USTED O HA TENIDO ALGUN CONTROL PRENATAL DURANTE SU ULTIMO EMBARAZO ?

- Si tuvo control médico..... 00
- Porque se sentía bien y no tenía interés en controlarse..... 01
- No tiene plata para ir al centro..... 02
- Se enteró muy tarde del resultado del embarazo, y en ese período de tiempo lo aborto..... 03
- Se sentía mal..... 04
- Vive lejos del hospital..... 05
- Le tiene miedo al hospital..... 06
- Porque no sabía que estaba embarazada, su menstruación era bien irregular..... 07
- Porque no quedaba encinta y programé, o sea lejos de él otro..... 08
- No le gusta ir al médico..... 09
- No tiene tiempo..... 10
- Me he descuidado..... 11
- No confía en los exámenes prenatales..... 12
- Otros..... 98
- No sabe, no responde..... 99

114. CUANTOS MESES DE EMBARAZO TENIA USTED CUANDO LE HICIERON EL PRIMER EXAMEN PRENATAL ?

Semanas = 1  
Meses = 2

122. POR CUANTO TIEMPO ESTUVO HOSPITALIZADA ?

116-228

Días se usa..... 1	226
Semanas se usa..... 2	226
Meses se usa..... 3	

Ejemplo: 10 días se codifica:

/ 1 / 1 / 0 /

126. COMPLETO SU ULTIMO PARTO MAS O MENOS EN EL TIEMPO ESPERADO O COMPLETO EL PARTO MUCHO ANTES DE LO ESPERADO (Un mes o más) ?

Especifique el tiempo:

00 En el tiempo esperado  
01  
02 Semanas  
03

129. DESPUES DE SU ULTIMO PARTO, LE TUVIERON QUE  
HOSPITALIZAR POR CUALQUIER RAZON RELACIONADA  
CON SU PARTO ?

- No la hospitalizaron.....	00
- Cuando fue operada.....	01
- Hemorragia.....	02
- Esta tomando anticonceptivo embarazada y temia que el niño tuviera algún problema y le tuvieron haciendo exámenes.....	03
- Acceso en la herida quirúrgica.....	04
- Fiebre.....	05
- Estaba débil.....	06
- Se infectó un punto.....	07
- Alta presión y hemorragia.....	08
- Hemorragia y retención de membranas (resto de placenta).....	09
- Infección en la matriz.....	10
- Césarea.....	11
- Diarrea y vómitos.....	12
- Fiebre y fuertes dolores de cabeza.....	13
- Reestablecerse.....	14
- Matriz dañada.....	15
- No sabe, no responde.....	99
- Otros.....	98



CASILLA

130. POR CUANTO TIEMPO ESTUVO HOSPITALIZADA ?

240-242

Días se usa.....	1	240
Semanas se usa.....	2	240
Meses se usa.....	3	
Codificar número que escriba la encuestadora		241-242

Ejemplo: 8 días sería:

/1/0/8/

01-60

131. LE HICIERON CONTROL MEDICO DESPUES DEL ULTIMO PARTO ?

- Si le hicieron control médico..... 00
- Porque estaba muy lejos el centro..... 01
- No fue más y no quiso..... 02
- No creyo importante asistir..... 03
- No tenía quien le cuidara la niña..... 04
- Se sentía bien..... 05
- Porque no le había venido el período..... 06
- En la institución no le informaron que tenía  
que regresar..... 07
- El niño tiene 8 días de nacido y tiene cita  
después..... 08
- No tiene vida sexual..... 09
- Fue después para que le hicieran la operación,  
pero no fue durante el parto..... 10
- Porque ella tenía que planificar, y ella quería  
tener más hijos..... 11
- Tiene dos días de haber dado a luz..... 12
- No quiere ir por pena a los doctores..... 13
- Dió a luz en casa (curandera)..... 14
- No tenía dinero para ir al centro..... 15
- Descuido..... 16
- Otro..... 98
- No sabe, no responde..... 99

133. DESPUES QUE NACIO SU ULTIMO HIJO, LO LLEVO A CONTROL DE NIÑO SANO ?

- Si lo llevo..... 00
- Larga distancia..... 01
- Murió al nacer (5 minutos vivió)..... 02
- No ha tenido tiempo, trabaja diariamente..... 03
- No le toca..... 04
- No estaba enferma..... 05
- Tiene que sacar la cita..... 06
- En esos tiempos no había tantos caso como ahora.... 07
- Acaba de nacer..... 08
- Razones económicas (falta de dinero para llevarlo). 09
- No tiene tiempo y se le pierden las tarjetas..... 10
- no tuvo interés en llevarlo..... 11
  
- Otros..... 98
- No sabe, no responde..... 99

134. QUE EDAD TENIA SU HIJO CUANDO LO LLEVO A CONTROL DE NIÑO SANO ?

250-252

Días se codifica..... 1

Semanas se codifica..... 2

Meses se codifica..... 3

Ejemplo:

A los 15 días se codifica /1/1/5/

A las 9 semanas /2/0/9/

217. SABE LA CAUSA DE MUERTE

01. Tuberculosis
02. Bronquitis
03. Asma
04. Soplo en el corazón
05. Paro cardíaco
06. Fiebre y diarrea
07. Infección intestinal
08. Putura de placenta
09. Hidrocefalia
10. Bronconeumonía
11. Asfixia
12. Ruptura de los pulmones
13. Desnutrición y anemia falciforme
14. Tos
15. Ahogo
16. Se lo llevaron los espíritus
17. Derrame
18. Malformación congénita de los pulmones

300. Píldoras, pastillas (gestágenos)

No ha oído hablar	400
Sólo ha oído hablar	500
Alguna vez ha usado	600

Usa actualmente:

Norilín o Noriday	701
Ovral	702
Euginon c.d.	703
Denoval	704
Bural	705
Norminest	706
Ovulem	707
Otro	708
Triquilar	709
No sabe	799

Dispositivo intrauterino (DIU), Espiral:

No ha oído hablar	4
Sólo ha oído hablar	5
Alguna vez ha usado	6

Usa actualmente:

T de cobre	1
Otro	2
No sabe	9

Inyecciones:

No ha oído hablar	4
Sólo ha oído hablar	5
Alguna vez ha usado	6

Usa actualmente:

De un mes	1
De 3 meses	2
Otro	3

Para los otros métodos (excepto esterilización masculina y femenina):

No ha oído hablar	4
Sólo ha oído hablar	5
Alguna vez ha usado	6
Usa actualmente	7

Para la esterilización (masculina y femenina)

No ha oído hablar	4000
Sólo ha oído hablar	5000

Actualmente se codifica el mes y el año

Mes		Año		

402. POR QUE NO ESTA USANDO NUNGUN METODO PARA EVITAR TENER HIJOS NUEVAMENTE ?

01. Por retroversión del útero.
02. No lo usa porque sus relaciones sexuales no son frecuentes.
03. No está de acuerdo con el método, ya que afectan su salud.
04. Porque aún no tiene relaciones.
05. Porque el señor no quiere.
06. Porque nunca ha usado eso y la doctora no me ha dado nada.
07. Porque ya se consó de tomar pastillas y el doctor le dijo que ella debe descansar de las pastillas.
08. Porque desea tener otro hijo.
09. No confía en usar métodos.
10. Porque tuvo complicaciones con el embarazo de la baby (mucho reposo).
11. Porque está esperando que le venga el período, después la controlan (recién parida).
12. Para ver si me operan.
13. Es muy difícil para ella tener un hijo, ya que tiene problemas de ovulación.
14. Tendré hijos hasta que Dios lo disponga.
15. Todos los métodos que ella ha usado le han dado problemas de salud.
16. Porque está dando pecho.
17. Porque no ha visitado al médico para ver cómo está de salud.
18. Porque fue con hemorragia y el doctor le informó que debía regresar cuando se normalizara la hemorragia.
19. Para ver si sale encinta.
20. No conocía ningún método, pero si desea usar.
21. Tiene problemas de esterilidad (el o ella).
22. Es operada de los ovarios.
23. El señor no quiere y ella desea tener otro.
24. Nunca ha tenido el problema de quedar embarazada.
25. Por descuido.
26. Tiene miedo usar método. *Fear*
27. No tiene necesidad de usar por ahora. *No need at this time*
98. Otros.
99. No sabe, no responde.

406. POR QUE NO LE GUSTARIA USAR UN METODO ANTICONCEPTIVO EN EL FUTURO ?

01. Porque tiene un bebé y piensa tener más.
02. Es malo y por eso es que hay muchas enfermedades en los niños.
03. Porque no tiene señor y no piensa tener relaciones sexuales en el futuro.
04. Porque no soy de tener hijos seguidos.
05. Ya le dije que tengo problemas de salud que me hacen ser casi una mujer infértil. (él o ella).
06. No creo en la fertilidad de ellos.
07. Porque ella piensa que si su esposo y ella se pone de acuerdo no hay necesidad de usar.
08. Porque desea tener los hijos que Dios le mande.
09. Porque podía tener un problema, cuando quisiera tener sus hijos.
10. Porque tiene un solo hijo, desea dos hijos más.
11. Porque después del próximo embarazo piensa operarse.
12. No está de acuerdo en prevenir hijos.
13. Porque me gustaría tener mis hijos apenas me case.
14. No piensa casarse nunca.
15. Por la edad.
16. Piensa que si los usa se enfermaría.
98. Otros.
99. No sabe, no responde.

---

409. CUANTO TIEMPO SE TARDA USTED NORMALMENTE PARA LLEGAR A ESTE LUGAR ?

Si se lo dan en minutos se pone = 0

Si se lo dan en horas se pone = 1

No. CASILLA

410. EN ESTE LUGAR SABE USTED CUANTO LE CUESTA ?  
(Mencionar el método)

637-640

Un paquete pastilla	1
Un paquete de tres condones	2
Un tubo de jalea	3
Un tubo de pastillas vaginales	4
Una inyección	5
Esterilización	6
Otro	8
No sabe, no responde	9

La lera. casilla identifica el método.

Ejemplo:

Pastilla B/.2.85 sería:

/ 1 / 0 / 0 / 5 /

Esterilización B/.300.00 sería:

/ 6 / 3 / 0 / 0 /

Cuándo pasa de B/.1,000.00 se codifica:

/ 6 / 9 / 9 / 8 /

Nota: Después de B/.10.00, se codifica en dólares directamente.

410. EN ESTE LUGAR SABE USTED CUANTO LE CUESTA.....(MENCIONAR EL METODO PREFERIDO) (Poner el código del método por delante).

000 Gratis

001 Menos de B/. 1.00

002 B/.1.00 a 1.49

003 1.50 a 1.99

004 2.00 a 2.49

005 2.50 a 3.00

006 3.00 a 3.99

007 4.00 a 4.99

008 5.00 a 7.49

009 7.50 a 9.99

010 010

011 011

012

998 998 y más

999 No sabe, no responde.



501. CUANTO TIEMPO SE TARDA NORMALMENTE PARA LLEGAR A ESTE LUGAR ?

Si se lo dan en minutos se codifica = 0

Si se lo dan en horas se codifica = 1

---

502. CUANTO CUESTA:

000 Gratis

001 Menos de B/.1.00

002 B/.1.00 a 1.49

003 1.50 a 1.99

004 2.00 a 2.49

005 2.50 a 3.00

006 3.00 a 3.99

007 4.00 a 4.99

008 5.00 a 7.49

009 7.50 a 9.99

010 010

011 011

998 998 y más

999 No sabe, no responde.



601. ¿ POR QUE NO DESEA MAS HIJOS ?

- 1077 ~~01.~~ La situación económica. *ECONOMICS*
- 83 ~~02.~~ Por la edad. *Too Old*
- 18 ~~03.~~ Porque la relación con su esposo no es muy buena; además está muy pobre y los niños no pueden ir a la escuela. *Poor Husband Relations + Econ.*
- 6 ~~04.~~ Tiene un niño que nació enfermo de los oídos (sordo). *Health*
- 18 ~~05.~~ Quiere tener los hijos que pueda educar. *Can't Educate*
- 14 ~~06.~~ Por el momento no, porque le gustaría tener más tiempo con ellos, y porque el trabajo no se lo permite. *Time + Work*
- 356 ~~07.~~ Ya tiene suficiente. *Have enough*
- 5 ~~08.~~ Porque todos los hijos están grandes. *Age*
- 40 ~~09.~~ Tengo que permanecer un mes en reposo cada vez que salgo encinta, y porque estoy propensa a un mal parto. *Medinal*
- 16 ~~10.~~ Por razones de salud le sacaron la matriz. *Health*
- 9 ~~11.~~ Ya tiene la pareja. *Have enough*
- 19 ~~12.~~ Dan mucho trabajo. *Too much work*
- 4 ~~13.~~ El médico me dijo que no podía tener más niños. *Dr says No*
- 1 ~~14.~~ Problemas de esterilidad (él o ella). *Sterility.*
- 46 98. Otros.
- 22 99. No sabe, no responde.

PREG.

No. Casilla

604. ¿ EN QUE LUGAR ?

655-656

Hospital Santo Tomás	01	46
Hospital Seguro Social	02	107
Hospital Integrado	03	157
Hospital	04	78
Centro de Salud con cama	05	49
Centro de Salud sin cama	06	362
Policlínica del Seguro Social	07	27
Subcentro de Salud	08	1
Puesto de Salud	09	4
Consultorio y hospitales particulares	10	69
Otro	98	9
No sabe, no responde	99	14

605. SEÑORA, YA TIENE TODOS LOS HIJOS QUE DESEA, TIENE INTERES EN OPERARSE Y SABE DONDE PUEDE CONSEGUIR INFORMACION RELACIONADA CON LA OPERACION ? ¿POR QUE NO HA IDO A OPERARSE HASTA AHORA?

- 30 01. Mi esposo no quiere. *Husband Against*
- 224 02. Porque según el doctor estoy muy joven. *Dr says too young for it*
- 11 03. Piensa que si se opera se enferma. *Fear Sideeffects*
- 59 04. Actualmente va a citas para ver si se opera. *Currently going to see if ya*
- 40 05. Porque comienza la escuela y no tiene quien le cuide los niños. *Child Care Problems*
- 83 06. Está actualmente embarazada. *Currently Preg*
- 140 07. Hay que tener el dinero para la operación. *Econ*
- 34 08. Está esperando que la llamen para su hospitalización. *Set up at hosp*
- 35 09. No ha querido y no ha ido al Centro de Salud. *Doesn't want it*
- 10 10. Porque no tiene señor, ni relaciones sexuales; por eso no ha ido. *No sex - no need*
- 5 11. Porque tiene problemas ginecológicos. *Gyn Problems*
- 23 12. Porque está esperando restablecerse un poco. *Wants to get better, little bit*
- 32 13. Por temor. *Fear*
- 16 14. Porque se cuida con el método. *OK with current method*
- 35 15. No ha tenido tiempo. *Not enough time*
- 4 16. Acaba de dar a luz. *Just gave Birth - postpartum*
- 18 17. Después que cumple el mes de haber dado a luz la van a operar. *After 1 month she will have operation*
- 31 18. El hijo está muy pequeño va a esperar que crezca un poco. *See if baby lives*
- 14 19. No tiene necesidad de operarse. *No Need*
- 70 98. Otro. *Other*
- 13 99. No sabe, no responde. *Don't know*
- Sorry before commit to Sterile*

PREG.

No. Casilla

608. ¿ EN QUE LUGAR ?

661-662

Hospital Santo Tomás	01
Hospital Seguro Social	02
Hospital Integrado	03
Hospital	04
Centro de Salud con cama	05
Centro de Salud sin cama	06
Policlínica del Seguro Social	07
Puesto de Salud	09
Consultorio y hospitales particulares	10
Otros	98
No sabe, no responde	99

609. ¿ POR QUE NO ESTARIA INTERESADA EN OPERARSE ?

- 28 01. Ahora no, quizás cuando tenga más edad.
- 67 02. Por temor a adquirir una enfermedad.
- 27 03. Nunca ha sido partidaria de esas operaciones para no tener más hijos.
- 17 04. No le gusta el método, al menos que sea urgente operarse.
- 33 05. Por la edad, ya tiene 40 años.
- 4 06. Deseo más niños y seguiré tratamiento para tener otro hijo.
- 17 07. Tengo firmeza en creer que el método que usamos es efectivo, mi último hijo tiene 14 años.
- 6 08. Preferiere que se opere el compañero.
- 14 09. No se piensa casar nunca; no tiene esposo.
- 11 10. Mi esposo es operado.
- 1 11. Ya tenia los papeles listos y soñó que se había muerto y por eso retiró los papeles.
- 1 12. Porque es diabética y requiere análisis y no tiene vida sexual.
- 5 13. Porque después podría cambiar de opinión y pudiera ser que quisiera quedar embarazada nuevamente.
- 31 14. No confio en las operaciones.
- 9 15. Porque hay que pagar.
- 68 16. Considera que no la necesita.
- 3 17. Porque después pierde el deseo sexual.
- 185 18. Le tiene miedo a la operación.

65 Otros 98. Otros.

109 Unk 99. No sabe, no responde.

703. DE QUIEN RECIBIO INFORMACION ESPECIFICA RESPECTO A LA OPERACION ?

Médico o doctor.....	1
Enfermera.....	2
Trabajador social.....	3
Algún familiar.....	4
Amigo.....	5
Otro personal de salud.....	6
Otro.....	7
No sabe, no responde.....	9

704. SI HUBIERA PODIDO ESCOGER A LA PERSONA QUE LE DIERA LA INFORMACION,  
¿A QUIEN HUBIERA ESCOGIDO ?

Médico o doctor.....	1
Enfermera.....	2
Trabajador social.....	3
Algún familiar.....	4
Amigo.....	5
Otro personal de salud.....	6
Otro.....	7
No sabe, no responde.....	9

709. POR QUE DECIDIO OPERARSE ?

- El médico le dijo que para tener otros hijos, tendría que usar metodos anticonceptivos y yo no quería usarlos.....	4
- Porque la operación es más segura.....	5
- Por la edad.....	6
- Por su trabajo.....	7
- Otro.....	8
- No sabe, no responde.....	9

711. CUALES FUERON LAS (OTRAS RAZONES ? (Anote textualmente ).

01. Problemas de salud.
02. Situación económica.
03. Porque con los otros niños anteriores tuvieron que hacerle transfusión sanguínea; nacieron con problemas.
04. Tuvo problemas con el último parto.
05. Prematuridad de los niños.
06. El compañero la dejó y estaba desesperada.
07. No quería tener más niños.
  
99. No sabe, no responde.

---

712. CUANTO TIEMPO PASO ENTRE LA DECISION DE OPERARSE POR PARTE DEL MEDICO Y LA FECHA DE LA OPERACION ?

Inmediatamente después del parto	000
Un día.....	001
2 días.....	002
etc.	
.....	364
	365
Más de un año.....	366
No sabe, no responde.....	999

---

714. DIGAME QUE PROBLEMAS TUVO ?

01. Problemas con la anestesia.
02. No pudo encontrar médico.
03. El Seguro Social cobraba más caro la operación que en el Nicolás Solano.
04. Estaba muy joven y buscó un médico para resolver el problema porque el en el hospital no quería operarla.
05. Hubo huelga de médico y no la podía operar.
  
99. No sabe, no responde.

716. ¿ POR QUE NO SE SIENTE SATISFECHA ?

01. Hubiera querido tener una niña.
02. Ahora quisiera tener otro.
03. Porque no puede tener más hijos y desea tenerlos.
04. Porque le ha afectado la salud.
05. Se siente bien de salud y no podía tener más hijos porque tenía la sangre llena de parásitos.
06. Estaba operada y quedo encienta.
98. Otros.
99. No sabe, no responde.

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718. ¿ EN QUE SE BASA USTED PARA DECIR QUE SI ESTA SATISFECHA ?

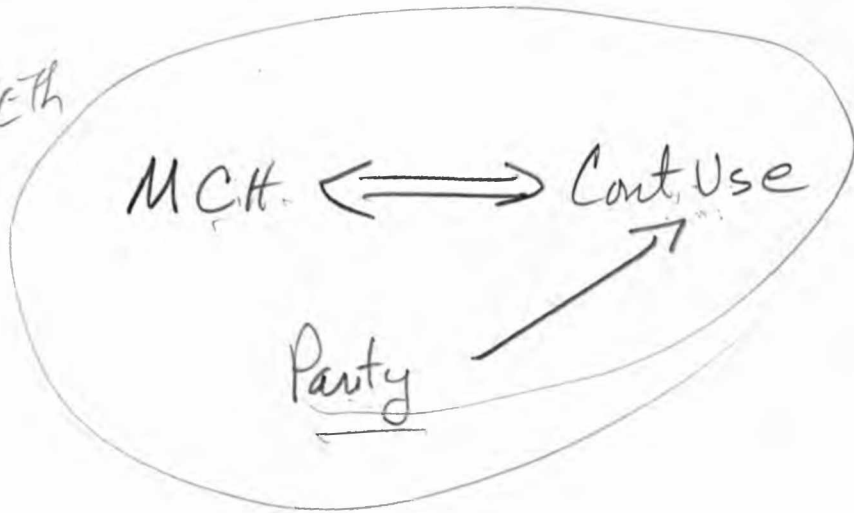
01. Porque ella necesitaba la operación por motivos de salud.
02. Porque no quiere más hijos por la situación económica.
03. Porque ya tiene todos los hijos que desea.
04. Estoy satisfecha y encantada con mis hijos.
05. No se ha sentido mal físicamente y sus relaciones sexuales son normales.
06. Porque tenía problemas de salud.
07. Porque no quiere tener más hijos.
08. Se siente contenta de ver a sus nietos y a todos sus hijos grandes.
09. Por su edad no podía tener más hijos; no estaba en condiciones de arriesgarse.
10. Fue un acuerdo de la pareja.
11. Porque hasta ahora está bien y puede seguir adelante.
12. Porque está enterada de lo que ella se había hecho.
13. No tiene el temor de quedar embarazada.
14. Puede brindar mayor atención a los que tiene.
15. Porque sufre de várices.
16. Porque fue el compañero que le pidió al doctor que la operara.
17. Porque el esposo no le ha dicho nada con respecto a la operación.
18. Porque estaba preocupada.
19. Porque él sabe que ahora estoy fuera de peligro, o sea de quedar embarazada.
98. Otros.
99. No sabe, no responde.



①

InvVar  $\rightarrow$  Dep

Res/Eth



② Reg - Surveys

719. POR QUE CREE USTED, QUE NO ESTA SATISFECHO SU ESPOSO O  
COMPAÑERO ?

030 Problemas sexuales en el matrimonio, no es el mismo.

98. Otros

99. No sabe, no responde.

720. EN ESTE MOMENTO, SI TUVIERA QUE TOMAR LA DECISION DE  
OPERARSE PARA NO TENER MAS HIJOS, ¿LO HARIA NUEVAMENTE ?

00. Sí lo haría nuevamente.

*Yes I would*

01. Desearía tener más hijos.

*No - want more kids*

02. Por miedo de ir al hospital .

*No - Fear of Hosp*

03. Tuvo muchos dolores de cabeza y vómitos después  
de la operación ( 5 días ).

*No - headaches,  
oper comp*

04. Después de la operación muchas cosas cambiaron  
desfavorablemente.

*No*

*No -*

05. Afecto a su vida.

*Affects your life*

06. Por la edad.

*No - age*

07. Mejor situación económica.

*No - better econ*

08. Después de operada quedo embarazada

*No Failure*

*Other*

98. Otros.

*UNK*

99. No sabe, no responde.

800. CON QUIEN VIVE USTED EN ESTE HOGAR ?

01. Con su esposo.
02. Con esposo e hijos.
03. Con esposo y padres.
04. Con esposo, hijos y padres.
05. Con esposo, hijos, padres y familiares.
06. Esposo, hijos y madre.
07. Esposo, hijos y papá.
08. Esposo, hijos, familiares y amigos.
09. Con mis padres.
10. Padres y hermanos.
11. Padres, hermanos y otros familiares o amigos.
12. Mamá y hermanos.
13. Papá y hermanos.
14. Con sus hermanos.
15. Con sus hermanos y otros familiares o amigos.
16. Con familiares y amigos.
17. Con amigas.
18. Sola.
19. Mamá e hijos.
20. Hijos.
21. Suegros.
  
98. Otros.
99. No sabe, no responde.

- 20- didn't know how to use OC's
- 21- can't have kids
- 22- didn't like
- 23- problem + ovaries
- 24- didn't think could get pregnant
- 25- fear parents would find out

808. QUE METODO UTILIZO EN ESA OCASION ?

Píldora.....	01
Condón.....	02
Espuma, jalea, pastillas vaginales.	03
Diafragma.....	04
Retiro.....	05
Ritmo.....	06
Billings.....	07
DIU.....	08
No recuerda.....	99
Otro.....	Esperar posible respuesta.

809. POR QUE NO UTILIZO UN METODO ANTICONCEPTIVO ?

09. No quería tomar nada porque sufro de presión alta. *Didn't want fear of HBP*
10. No podía ir al centro de salud, para conseguir la píldora, porque su mamá se daba cuenta. *Couldn't go to health post because mother would find out*
11. Si conocía, pero no quería. *didn't want*
12. Fue violada. *rape*
13. No pensó en ese momento. *didn't think of it at the time*
14. Quería tener hijos. *wanted children*
15. Tenía miedo de causarle daño a sus hijos. *Fear of danger to kids*
16. Estaba casada. *married*
17. No sabía nada de eso. *didn't know about contraception*
18. No era conveniente. *not convenient*
19. No le preocupaba si quedaba encinta. *not bothered if she got pregnant*
98. Otros *other*
99. No sabe, no responde' *WS*

812. QUE METODO ANTICONCEPTIVO UTILIZO ?

Píldora.....	01
Condón.....	02
Espuma, jalea, pastillas vaginales..	03
Diafragma.....	04
Retiro.....	05
Ritmo.....	06
Billings.....	07
DIU.....	08
Inyecciones.....	09
Hierba.....	10
No recuerda.....	99
Otro.....esperar posible respuesta	

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813. POR QUE NO UTILIZO UN METODO ANTICONCEPTIVO ?

- 09. Desea otro hijo.
- 10. Sabe que está embarazada.
- 11. No sabe como usarlo todavía.
- 12. No quiero; yo tengo a mi marido.
- 13. Quería quedar embarazada.
- 14. Porque no le gusta usar métodos.
- 15. No le gusta usarlos.
- 16. Está amamantando.
  
- 98. Otros
- 99. No sabe, no responde.

REPUBLICA DE PANAMA

MINISTERIO DE SALUD/CAJA DEL SEGURO SOCIAL  
MINISTERIO DE PLANIFICACION Y POLITICA ECONOMICA

CUARTO INFORME DE PROGRESO  
AL 31 DE ENERO DE 1985

PROYECTO RED NACIONAL DE SERVICIOS DE SALUD  
( MEJORAMIENTO RED HOSPITALARIA NACIONAL )

PANAMA - 5200

FINANCIADO POR: FONDO DE PRE-INVERSION

BANCO INTERAMERICANO DE DESARROLLO

ORGANIZACION PANAMERICANA DE LA SALUD (Agencia Ejecutora)